



AGENDA ITEM 5.

TOPIC: Continuing Concept Work Related to the Authorized Activities Model

General Overview

The *Veterinary Professionals Act, 2024* grants the Transition Council of the College of Veterinary Professionals of Ontario the ability to propose regulations to support the implementation of a new statutory framework for the practice of veterinary medicine in Ontario. The development of these regulations remains subject to the approval of the Lieutenant Governor in Council and is supported and overseen by the Ministry of Agriculture, Food, and Agribusiness (OMAFRA).

In developing these proposed regulations, OMAFA has advised that it would be beneficial for the Transition Council to focus on the development of regulatory concepts – instead of specific regulatory language – to reflect and support the way that OMAFA conducts its work. Cohesiveness in approach whenever possible between the Transition Council and OMAFA during the regulation development process is beneficial as it will allow for both the public and the profession to experience consistency in the way they receive information. Given this, work related to regulation development has moved forward with a concept-based lens for the Transition Council to review and consider.

Process for Regulation Development

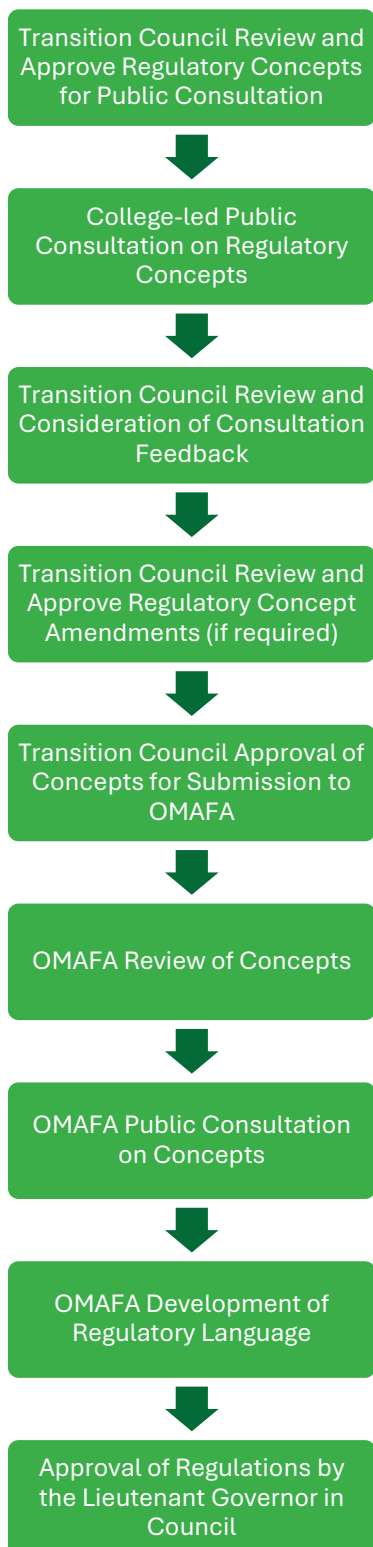
A flow chart has been developed to help illustrate the multi-step process required to instill a new Regulation under the *Veterinary Professionals Act, 2024*. (see the last page of this cover sheet).

Work of the Transition Council Related to Ongoing Topics

Transition Council has now held three meetings in which it has considered a variety of regulatory concepts. As part of these discussions, several aspects of different topics have been flagged for further consideration or review. Given this, the primary focus of the current Transition Council meeting will be to return to these subjects to allow for the review of additional information and/or the presentation of additional areas of consideration under topics that have already been discussed.

Discussion

In reviewing these documents, the Transition Council is encouraged to debate, discuss, and question any aspect of the material presented. To aid in these discussions, opportunities will be presented at the end of each agenda item to allow for focused feedback and to allow for Transition Council to determine next steps.





AGENDA ITEM 5.1

TOPIC: Regulatory Exemptions – Embryo Implantation

Overview

Section 9 of the *Veterinary Professionals Act, 2024* establishes the legislative authority for the development of an authorized activity model for the practice of veterinary medicine in Ontario. This framework is further supported by Schedule One of the *Act*, where a list of seventeen (17) authorized activities is outlined.

The *Veterinary Professionals Act, 2024* permits the development of regulatory exemptions related to the authorized activity model.

This cover sheet outlines proposed recommendations related to a regulatory exemption for embryo implantation for inclusion in a regulatory concept on the authorized activity model.

Relevant Sections

An overview of the relevant sections of legislation, regulation, by-law, and policy related to embryo implantation (both current and future) has been attached to this cover sheet as Appendix “A”.

History of the College’s Work Related to Regulatory Exemptions and Embryo Implantation

Current Framework

The *Veterinarians Act* and Regulation 1093 currently outline an exclusive scope of practice model for veterinary medicine. This means that unless otherwise specifically stated, veterinary medicine may only be performed by a veterinarian or auxiliary working under their supervision and delegation.

The process of embryo transfer (including the implantation of an embryo) is currently considered the practice of veterinary medicine. Section 19 of Regulation 1093 permits a veterinarian to direct an auxiliary who is suitably qualified by education or experience to perform the tasks traditionally assigned to auxiliaries including flushing and infusion procedures in the course of embryo transfers, but this must be done under a veterinarian’s supervision and only after appropriate assessment of auxiliary’s skills by the veterinarian.



Inclusion in Legislative Reform

The College's 2018 Concept Paper entitled "Achieving a Modern Approach to the Regulation of Veterinary Medicine in Ontario" contained several recommendations which outlined a proposed shift away from an exclusive scope of practice model in favour of an authorized activity model.

This proposed model offered a clearer definition of what veterinary medicine is and laid out a risk-based approach to authorized activities. Activities that posed the greatest risk of harm or potential harm to animals and/or people were proposed to continue to be regulated under the College's oversight. Activities that did not fall within these restrictions were recognized as being within the public domain. This proposed model was designed to assist with clarity for the veterinary profession, the public, and the courts, in determining whether a person had engaged in unauthorized practice.

In addition, the proposed model acknowledged animal care as a system that included both veterinary and non-veterinary animal care providers. The Concept Paper acknowledged that non-veterinary animal care providers can, and do, provide lower-risk therapies and services to animals upon client request and without veterinary oversight. Many of these activities fall outside of the authorized activity model but others cross over. The Concept Paper recognized this overlap and recommended that a system be developed that could properly address these circumstances.

These recommendations were made after several rounds of consideration and conversation amongst both the College's Working Groups and Legacy Council, including extensive background research and two rounds of public consultation.

The *Veterinary Professionals Act, 2024* reflects these recommendations and Transition Council is now in the position to develop a proposed regulatory concept related to the authorized activity model that contains recommendations related to a regulatory exemption pertaining to embryo implantation.

What Will This Look Like?

Persons who meet the guidelines, processes, terms, conditions, limitations, and/or prohibitions outlined in regulation will be permitted to perform certain authorized activities related to animals. The ability to perform these authorized activities will be independent from a veterinarian member and the public will be able to directly access these services.



Additional Work Completed to Help Inform Regulation Development

The topic of embryo implantation was not on the list of the College's identified areas for consideration in the development of its 2018 Concept Paper. However, during the May 2023 consultation by the Ministry of Agriculture, Food, and Agribusiness related to the modernization of the *Veterinarians Act*, it was brought to the attention of the College by industry stakeholders who wished to raise the performance of embryo implantation in bovine for consideration for an exemption from the authorized activity model.

This resulted in the College undertaking a research and risk-based review of the performance of embryo transfer on bovine as well as other forms of livestock to ensure a well-rounded understanding of the environment. This process also included ongoing engagement with several interested parties, most notably:

- Eastgen;
- The Canadian Embryo Transfer Association; and
- Direct conversations with veterinarians working in livestock reproduction.

In completing this work, it became clear that the level of risk associated with the performance of embryo implantation in bovines allowed for other trained non-veterinary animal care providers to provide this important service. However, through this same research and conversation, it also became clear that this same risk analysis did not, and should not, extend to the performance of this procedure in all types of livestock, especially in relation to equine. Here, these findings were based on the fundamental differences that exist between different species of livestock. When performed in bovines, the implantation of embryos is a straight-forward, non-surgical process and was found to rarely require sedation and carries with it similar risk levels associated with artificial insemination. This was not the case in equines, where the implantation of embryos is more complicated and, in all but rare cases, requires sedation to ensure the safety of both the animal and the provider. Implantation of embryos in ovine was also found to be more complicated through surgical means.

This background research helped to inform both the College's early feedback to the government related to legislative reform as well as the current recommendations contained in this cover sheet.

Further Information Related to the Statutory Exception Related to Embryo Implantation

When Bill 171 (the bill that eventually became the *Veterinary Professionals Act, 2024*) was first introduced in early 2024, it contained a statutory exception excluding the implantation of



embryos as part of a business that engages in the artificial insemination of livestock from the authorized activity model (but not from the risk of harm clause). Given the College’s previous work and position in this area, Legacy Council chose to flag its concerns with this approach directly to Standing Committee. These concerns were heard, and subsequent versions of Bill 171 were amended to include the ability for the College to develop a regulatory exemption that could further limit or clarify any of the statutory exceptions including the one related to embryo implantation.

Proposed Recommendations Related to a Regulatory Exemption for Embryo Implantation

Within the regulatory concept related to the authorized activity model, it is proposed that the following two (2) recommendations pertaining to a regulatory exemption for embryo implantation be incorporated. These recommendations are in addition to persons performing embryo implantation being subject to the risk of harm clause under the *Act*.

Each of these recommendations has been developed based on extensive research and conversation including advice obtained from the College’s legal team.

Regulatory Exemption to Limit the Statutory Exception for Embryo Implantation

In accordance with *Veterinary Professionals Act, 2024*¹, it is proposed that a regulatory exemption be developed to limit the statutory exception for embryo implantation contained in the *Veterinary Professionals Act, 2024* to performance only in bovines. This recommendation is based on the College’s extensive background research and risk-based analysis related to this service.

Additional Recommendations for Qualification under the Statutory Exception and Regulatory Exemption

In addition to limiting the statutory exception to performance only in bovine, it is proposed that a regulatory exemption for embryo implantation also require a person to adhere with the following guidelines, processes, terms, conditions, limitations, and/or prohibitions:

Recommendation	Reasoning
Has completed specific training in embryo implantation in bovine that was developed	The College’s research related to embryo implantation indicates that it can be safely performed by persons who have received

¹ The College has received confirmation from the Ministry of Agriculture, Food, and Agribusiness that it has the ability under the *Veterinary Professionals Act, 2024* to propose additional requirements and/or limitations around statutory exceptions. The specific clauses through which this can be achieved will be outlined by the legislative drafters at the time of regulation language development.



<p>with veterinarian oversight and includes practical experience.</p>	<p>formal and specific training that was developed with veterinarian oversight and included practical experience.</p> <p>This approach is consistent with the current requirements for a veterinarian to assess an auxiliary’s skillset before permitting them to perform embryo related services and has been modified to reflect the new model.</p>
<p>Has the knowledge, skill, and judgement to:</p> <ol style="list-style-type: none"> 1. Perform the authorized activity safely, effectively, and ethically; and 2. Determine the animal’s condition warrants performance of the authorized activity based on the known risks and benefits. 	<p>Recognition of the need for individuals to reflect on their own knowledge, skills, and judgement when determining whether to proceed with offering an authorized activity is fundamental to ensuring public safety and reflects the core principles of professional regulation.</p>

These recommendations were developed based on an in-depth and multi-year research and jurisdictional review and that sought to determine the common and consistent frameworks in place related to the performance of this activity in Ontario.

A person would not be required to provide proof of their eligibility related to these qualifications to the College. Instead, a person would be expected to review the statutory exception and regulatory exemption in combination and determine whether they meet the requirements.

Should the College become aware of a person who is offering embryo implantation to the public who may not meet these requirements, the College would have the ability to investigate these concerns including requesting proof of eligibility and adherence, and to pursue further action including the ability to investigate under either unauthorized practice and/or the risk of harm clause if warranted.

Note on Clinical Assessment

The recommendations outlined in this cover sheet are not intended to prevent non-veterinary animal care providers from performing a clinical assessment as this is a separate activity from making or communicating a diagnosis.

For clarity, a clinical assessment is completed by gathering information based on an animal(s) or group of animals’ history, symptom presentation, and potential treatment and goals. Clinical assessments are achieved through active interview of a client regarding the animal(s) or group of animals, and objective standardized tests and measurements.



A diagnosis is achieved through confirmation of presenting criteria to determine cause. These criteria are based upon symptoms, signs, test results, and in some cases the initial result of treatment.

Examples Related to the Statutory Exception and Regulatory Exemption for Embryo Implantation

Example One

Scenario

A producer hires a business that engages in the artificial insemination of bovine to perform embryo implantation on a heifer.

Explanation

A producer hires a business that engages in the artificial insemination of bovine to perform embryo implantation on a heifer. The business has several trained non-veterinary animal care providers of this service on staff.

The non-veterinary animal care provider arrives on farm and assesses the animal. Based on their assessment, they begin to treat the animal using the following authorized activities:

- Performing upon an animal a manual procedure for the purpose of embryo implantation.

The non-veterinary care provider encounters no complications or difficulties during the procedure.

(continued on next page)



Discussion

Transition Council is asked to review these proposed recommendations and related to a regulatory exemption for embryo implantation for inclusion in a regulatory concept on the authorized activity model. A draft copy of the concept chart related to embryo implantation has been attached to this cover sheet as Appendix “B” to support this review.

To aid in this discussion, Transition Council is encouraged to consider the following questions:

- Is there anything unclear or missing in these proposed recommendations?
- Do the proposed recommendations seem logical?
- Do the proposed recommendations raise any concerns?
- Do the proposed recommendations raise any thoughts or considerations related to unintended consequences?

Attachments

1. Appendix A – Relevant Sections of Legislation, Regulation, By-Law and Policy – Embryo Implantation
2. Appendix B – Draft Concept – Embryo Implantation

Embryo Implantation

Relevant Sections of Legislation, Regulation, By-Law, and Policy

Current Framework Under the *Veterinarians Act*

3 (1) The principal object of the College is to regulate the practice of veterinary medicine and to govern its members in accordance with this Act, the regulations and the by-laws in order that the public interest may be served and protected.

Idem

(2) For the purpose of carrying out its principal object, the College has the following additional objects:

1. To establish, maintain and develop standards of knowledge and skill among its members.
2. To establish, maintain and develop standards of qualification and standards of practice for the practice of veterinary medicine.
3. To establish, maintain and develop standards of professional ethics among its members.
4. To promote public awareness of the role of the College.
5. To perform such other duties and exercise such other powers as are imposed or conferred on the College under any Act.

7 (1) Subject to the approval of the Lieutenant Governor in Council and with prior review by the Minister, the Council may make regulations with respect to the following matters:

8. Prescribing and governing standards of practice for the profession

11 (1) No person shall engage in the practice of veterinary medicine or hold himself, herself or itself out as engaging in the practice of veterinary medicine unless the person is the holder of a licence. R.S.O. 1990, c. V.3, s. 11 (1).

Current Framework Under Regulation 1093

1. In this Regulation,

“auxiliary” means a person involved in a member’s practice of veterinary medicine other than another member; (“auxiliaire”)

19. (1) A member is responsible for the conduct of his or her auxiliaries and for the suitability and quality of the performance of their acts. R.R.O. 1990, Reg. 1093, s. 19 (1).

(2) A member is guilty of professional misconduct if an auxiliary of the member does or omits to do anything that, if done or omitted by a member, would constitute professional misconduct. R.R.O. 1990, Reg. 1093, s. 19 (2).

(3) A member shall supervise the performance of an auxiliary's task in one of the following methods, whichever is appropriate in the circumstances:

1. Immediate supervision, where the member is on the same premises as the auxiliary and can see and hear the auxiliary perform the task.
2. Direct supervision, where the member is on the same premises as the auxiliary and, although not present to see and hear the task being performed, is accessible to the auxiliary in a timely and appropriate manner.
3. Indirect supervision, where the member is not on the same premises as the auxiliary while the task is being performed but where the member,
 - i. communicates appropriately with the auxiliary before and after the auxiliary performs the task, and
 - ii. is accessible to the auxiliary in a timely and appropriate manner while the task is being performed. O. Reg. 233/15, s. 13.

(4) A member may direct an auxiliary who is suitably qualified by education or experience to perform, under the supervision of a member, the tasks traditionally assigned to auxiliaries including flushing and infusion procedures in the course of embryo transfers after appropriate assessment by a member. R.R.O. 1990, Reg. 1093, s. 19 (4).

Future Framework under the *Veterinary Professionals Act, 2024*

Authorized activities

9 (1) No person shall carry out an authorized activity described in section 1 of Schedule 1 while engaged in the practice of veterinary medicine unless the person is a member.

Limitations

(2) A member may only carry out an authorized activity while engaged in the practice of veterinary medicine and subject to any prescribed conditions or prohibitions and any terms, conditions or limitations imposed on their licence.

Authorized activities — non-members

(3) Despite subsection (1), a person who is not a member may, subject to any prescribed conditions or prohibitions, carry out an authorized activity while engaged in the practice of veterinary medicine if,

- (a) the regulations permit a person who is not a member to carry out the authorized activity; and
- (b) the authorized activity is delegated to that person by a member.

Authorized activities — students

(4) Despite subsections (1) and (3), a student may carry out an authorized activity if the student is doing so while fulfilling the requirements to become a member and the activity is done under the supervision or direction of a veterinarian member.

Authorized activities — professionals

(5) Despite subsections (1) and (3), the following persons may, subject to and in accordance with any prescribed guidelines, processes, terms, conditions, limitations or prohibitions, carry out such authorized activities as may be prescribed:

1. A person who, under the *Chiropractic Act, 1991*, is a member of the College of Chiropractors of Ontario.
2. A person who, under the *Pharmacy Act, 1991*, is a member of the Ontario College of Pharmacists.
3. A person who belongs to or practises a prescribed profession or such other persons as may be prescribed.

Collaboration

(6) When developing a proposal for regulations in relation to subsection (5), the College shall take reasonable steps to consult with such professions as would be addressed in those regulations and shall report to the Minister on the outcome of those consultations.

Exceptions

10 (1) Subsection 9 (1) does not apply to prevent a person from carrying out an activity described in sections 2 and 3 of Schedule 1.

Application of Drug and Pharmacies Regulation Act

(2) The *Drug and Pharmacies Regulation Act* does not apply to prevent a member from compounding, dispensing or selling drugs in the course of engaging in the practice of veterinary medicine.

Sale of drugs

(3) Regulations made under the *Animal Health Act, 2009* do not apply to prevent a member from selling a drug in the course of engaging in the practice of veterinary medicine to an owner of livestock for the treatment of livestock.

Risk of harm

11 (1) No person other than a member acting within the scope of the practice of veterinary medicine shall treat an animal, or advise an owner or their representative with respect to an animal's health, in circumstances in which it is reasonably foreseeable that serious bodily harm to an animal or a person may result from the treatment or advice or from an omission from the treatment or advice.

Exceptions

(2) Subsection (1) does not apply with respect to,

- (a) any treatment by a person who is acting under the direction of or in collaboration with a member if the treatment is within the scope of the practice of veterinary medicine;
- (b) an activity carried out by a person if the activity is an authorized activity that was delegated under subsection 9 (3) to the person by a member;
- (c) an activity set out in section 2 of Schedule 1, if the person carrying out the activity is not otherwise prevented to do so under the Act; or
- (d) any prescribed treatment, advice, authorized activity or person

93 (1) Subject to the approval of the Lieutenant Governor in Council, the Council may make regulations,

1. prescribing and governing anything in this Act that is described as being prescribed, done in accordance with the regulations, provided for in the regulations or authorized or required by the regulations, other than a matter that this Act describes as being prescribed by the Minister or Lieutenant Governor in Council or provided for in regulations made by the Minister or Lieutenant Governor in Council;

7. with respect to authorized activities,

- i. prescribing authorized activities for the purposes of section 9,
- ii. limiting or clarifying the authorized activities,
- iii. permitting or prohibiting veterinary technician members or classes of veterinarian members from carrying out specified authorized activities and governing the circumstances in which those activities may or shall not be carried out, and
- iv. permitting persons who are not members to carry out specified authorized activities and limiting and governing the carrying out of such activities;

8. prescribing exceptions for the purpose of section 10 or 11 or limiting or clarifying the exceptions set out in sections 2 and 3 of Schedule 1;

97 (1) The Council may establish,

(a) standards for veterinary facilities that must be met by an applicant for a certificate of accreditation and maintained by the holder of a certificate of accreditation or other prescribed persons; and

(b) standards for the practice of veterinary medicine that must be met and maintained by members.

Schedule 1
Authorized Activities

1 The following are authorized activities for the purposes of the Act:

1. Communicating to an individual a diagnosis identifying a disease, disorder, dysfunction or condition as the cause of an animal's signs and presentation in circumstances in which it is reasonably foreseeable that the individual will rely on the diagnosis.
2. Performing a medical assessment to determine the fitness for purpose or soundness of an animal, or group of animals, on which it is reasonably foreseeable that a person or organization will rely on the assessment.
3. Ordering laboratory tests on an animal or on specimens taken from an animal.
4. Prescribing a drug.
5. Compounding, dispensing or selling a drug.
6. Performing a procedure on tissue below the dermis.
7. Performing a procedure below the surface of a mucous membrane.
8. Performing a procedure on or below the surfaces of the teeth, including the scaling of teeth and occlusal equilibration.
9. Performing a procedure on or below the surface of the cornea.
10. Setting, immobilizing or casting a fracture of a bone or a dislocation of a joint or a severed tendon.
11. Administering a substance by injection or inhalation, or monitoring of such injection or inhalation.
12. Moving the joints of the spine beyond the animal's usual physiological range of motion using a fast, low amplitude thrust.
13. Putting an instrument, arm, hand or finger,
 - i. beyond the external ear canal,
 - ii. beyond the point in the nasal passages where they normally narrow,
 - iii. beyond the larynx,
 - iv. beyond the opening of the urethra,
 - v. beyond the labia majora,
 - vi. beyond the anus or cloaca, or
 - vii. into any other natural or artificial opening into the body.

14. Applying or ordering the application of a prescribed form of energy.
15. Performing upon an animal any manual procedure for the diagnosis or treatment of pregnancy, sterility or infertility, inclusive of ova and embryo transfer.
16. Performing allergy testing.
17. Such other authorized activities as may be prescribed.

Exceptions

2 The following are exceptions for the purposes of sections 10 and 11 of the Act:

1. Rendering first aid or temporary assistance in an emergency without fee.
2. Treating an animal if the person is the owner of the animal, is a member of the household of the owner of the animal or is employed for general agricultural or domestic work by the owner of the animal.
3. The administration of a treatment plan by a custodian of an animal if the treatment plan is made by a veterinarian member and carried out at the direction of the owner.
4. Taking blood samples.
5. Preventing or treating fish and invertebrate diseases or pests in fish or invertebrates.
6. Such other exceptions as may be prescribed.

Same

3 The following are exceptions for the purposes of section 10 of the Act:

1. Collecting or using semen as part of a business that engages in the artificial insemination of livestock.
2. Implantation of embryos as part of a business that engages in the artificial insemination of livestock.
3. Confirmation of pregnancy in domesticated farm animals of the genus ovis or capra through ultrasound conducted on the surface of the skin.
4. Confirmation of pregnancy in livestock through blood or milk analysis as part of a business.
5. Administration of heat synchronisation injections to livestock as part of a business that engages in the artificial insemination of livestock.
6. Collecting or transporting ova and embryos of animals other than mammals.
7. Non-surgical insemination.
8. Artificial insemination of invertebrates.
9. Such other exceptions as may be prescribed.

Authorized Activities Concept Chart - Embryo Implantation

Section	Main Objectives	Primary Concepts	Additional Information	Transition Comments	Intended Outcomes
<p>Authorized Activities – Regulatory Exemptions - General</p>	<ul style="list-style-type: none"> • Develop clear and risk-based regulatory exemptions. • Confirm majority of statutory exceptions as written. • Outline uniform expectations related to the risk of harm clause. 	<p>General</p> <p>Section 9 of the <i>Veterinary Professionals Act, 2024</i> establishes the legislative authority for the development of an authorized activity model for the practice of veterinary medicine in Ontario. This framework is further supported by Schedule One of the <i>Act</i>, where a list of seventeen (17) authorized activities is outlined.</p> <p>The <i>Act</i> also permits the development of regulatory exemptions related to the authorized activity model.</p> <p>Purpose</p> <p>One of the main objectives of the College in pursuing an authorized activity model was to formally recognize animal care as a system in which both veterinary and non-veterinary animal care providers exist. Most of the services provided by non-veterinary animal care providers fall outside of the authorized activities and exist in the public domain. Some others, however, cross over and require the consideration and development of regulatory exemptions in order to continue to be delivered. In this consideration, the public expects that the College will continue to oversee the performance of activities that pose a risk of harm or potential harm to an animal(s) or group of animals and/or people while also expecting direct access to other competent and skilled animal care providers. Given this, the College is required to conduct a risk-based analysis of potential allowances for other non-veterinary animal care providers to determine whether it is in the public interest to allow for exemptions for certain persons and/or activities.</p>	<p>The one statutory exception that the College is seeking additional clarifications and/or limitations on relates to embryo implantation and will be specifically addressed within its own section.</p>		<p>Creation of a consistent framework for regulatory exemption upon which additional detail can be developed.</p>

		<p>Statutory Exceptions</p> <p>The College proposes that the majority of statutory exceptions contained in Schedule One of the <i>Act</i> remain as presented without any additional limitations or clarifications outlined in regulation.</p> <p>Applicability of the Risk of Harm Clause</p> <p>The College proposes that regulation language be developed that clarifies that all professions, persons, and/or activities listed within regulatory exemptions remain subject to the risk of harm clause.</p>			
<p>Authorized Activities – Regulatory Exemptions – Embryo Implantation</p>	<ul style="list-style-type: none"> Limit the statutory exception found in the <i>Veterinary Professionals Act, 2024</i>. Provide clarity regarding qualifications required. 	<p>General</p> <p>The <i>Veterinary Professionals Act, 2024</i> grants the College permission to develop regulatory exemptions further clarifying and/or limiting the statutory exceptions contained in Section One of the <i>Act</i>.</p> <p>Purpose</p> <p>The public expects that the College will continue to oversee the performance of activities that pose a risk of harm or potential harm to an animal(s) or group of animals and/or people. The College’s research has indicated that many forms of embryo implantation continue to pose a high risk of harm or potential harm and so the College has a responsibility to continue to maintain oversight of these activities.</p> <p>Regulatory Exemption to Limit the Statutory Exception for Embryo Implantation</p>	<p>These recommendations were developed based on an in-depth and multi-year research and jurisdictional review that sought to determine the common and consistent frameworks in place related to the performance of this activity in Ontario.</p> <p>In completing this work, it became clear that the level of risk associated with the performance of embryo implantation in bovines allowed for other trained non-veterinary animal care providers to</p>	<p>The process of embryo transfer (including the implantation of an embryo) is currently considered the practice of veterinary medicine. Section 19 of Regulation 1093 permits a veterinarian to direct an auxiliary who is suitably qualified by education or experience to</p>	<p>Creation of a risk-based regulatory exemption for embryo implantation that limits the statutory exception but continues to facilitate public access to needed animal care services while also continuing to encourage interprofessional collaboration.</p>

		<p>The College proposes that regulation language be developed to create a regulatory exemption to limit the statutory exception for embryo implantation to performance only in bovines.</p> <p>Additional Recommendations for Qualification Under the Statutory Exception and Regulatory Exemption</p> <p>In addition to limiting the statutory exception to performance only in bovine, The College proposes that a regulatory exemption for embryo implantation also require a person to adhere with the following guidelines, processes, terms, conditions, limitations, and/or prohibitions:</p> <ul style="list-style-type: none"> • The person must have completed specific training in embryo implantation in bovine that was developed with veterinarian oversight and included practical experience; • The person must have obtained consent of the owner prior to performing the authorized activity; and • The person must have the knowledge, skill, and judgement to: <ul style="list-style-type: none"> ○ Perform the authorized activity safely, effectively, and ethically; and ○ Determine the animal’s condition warrants performance of the authorized activity based on the known risks and benefits 	<p>provide this important service. However, through this same research and conversation, it also became clear that this same risk analysis did not, and should not, extend to the performance of this procedure in all types of livestock, especially in relation to equine. Here, these findings were based on the fundamental differences that exist between different species of livestock. When performed in bovines, the implantation of embryos is a straight-forward, non-surgical process and was found to rarely require sedation and carries with it similar risk levels associated with artificial insemination. This was not the case in equines, where the implantation of embryos is more</p>	<p>perform the tasks traditionally assigned to auxiliaries including flushing and infusion procedures in the course of embryo transfers.</p> <p>This proposed approach seeks to modernize the current system to reflect the new regulatory model.</p>	
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			<p>complicated and, in all but rare cases, requires sedation to ensure the safety of both the animal and the provider. Implantation of embryos in ovine was also found to be more complicated through surgical means.</p> <p>A person would not be required to provide proof of their eligibility related to these qualifications to the College. Instead, a person would be expected to review the statutory exception and regulatory exemption in combination and determine whether they meet the requirements. Should the College become aware of a person who is offering embryo implantation to the public who may not meet these requirements, the College would have the ability to investigate these concerns including</p>		
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			requesting proof of eligibility and adherence and to pursue further action including the ability to investigate under either unauthorized practice and/or the risk of harm clause if warranted.		
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AGENDA ITEM 5.2

TOPIC: Non-Delegable Activities – Further Consideration of Dental Extractions

Overview

On November 7, 2024, Transition Council reviewed a list of authorized activities (or components of) that were proposed as non-delegable and therefore only able to be performed by veterinarian members.

For more information on this review, please refer to Agenda Item **5.2** in the November 7, 2024, meeting package.

During this review and discussion, Transition Council flagged the performance of dental extractions as requiring more background research and consideration before determining whether to recommend that this procedure be non-delegable.

This additional information has been gathered, and Transition Council is now tasked with determining its direction related to this specific activity.

Relevant Sections

An overview of the relevant sections of legislation, regulation, by-law, and policy related to the delegation of dental extractions (both current and future) has been attached to this cover sheet as Appendix “A”.

History of College’s Work and Positioning Related to Dental Extractions

Current Framework

The performance of dentistry on animals is considered the practice of veterinary medicine under the *Veterinarians Act*.

Section 32 (2) 2. of the *Veterinarians Act* also permits the College to develop standards of practice for veterinary medicine. It is under this authority that the College has developed and maintained a *Professional Practice Standard: Veterinary Dentistry* since March 2015.¹

The *Professional Practice Standard: Veterinary Dentistry* states that dental extractions cannot be delegated. This expectation has existed since the *Professional Practice Standard* was

¹ The College has had other historic standards related to veterinary dentistry, but the most current standard has existed since March 2015.



adopted and was not altered by Legacy Council in its most recent review of the College's dentistry standard in June 2023.

Inclusion in Legislative Reform

The College's 2018 Concept Paper entitled "Achieving a Modern Approach to the Regulation of Veterinary Medicine in Ontario" contained several recommendations related to the inclusion of both veterinarians and veterinary technicians under the same statutory framework. As part of this proposal, the Concept Paper outlined the need for continued adherence to ongoing public expectations related to the provision of safe and accountable veterinary care.

The Concept Paper did not contain any specific recommendations related to dental extractions.

Additional Work Completed Since November 7, 2024

Since receiving direction from Transition Council, additional materials have been gathered to help inform continued discussion at the Council table. This has included a jurisdictional scan of veterinary regulators across Canada, a review of resources related to the core competencies of registered veterinary technicians, and a literature review to identify risks associated with the performance of dental extractions.

Jurisdictional Scan

A jurisdictional scan of all publicly available statutes, regulations, standards, by-laws, and guidance from veterinary regulators across Canada produced the following results:

1. The majority of Canadian veterinary regulators do not permit any form of delegation related to dental extractions.
2. If the delegation of dental extractions is permitted it is associated with the caveat that its performance must not require surgical intervention or the drilling or sectioning of teeth.

For more information related to this jurisdictional scan, please refer to the full table attached to this cover sheet as Appendix "B".

A review of the education and core competencies of RVTs in Ontario and Canada garnered the following results:

Ontario Association of Veterinary Technicians

The Ontario Association of Veterinary Technicians (OAVT) has developed a list of Entry to Practice Standards that contains the core competencies that RVTs are expected to hold on entry to practice. Included in this list is a section related to dentistry that notes that all graduates should be able to:



- Recognize normal and abnormal dental structures, conditions and lesions, causes and stages of gingivitis and periodontitis, and dental related pathologies;
- Understand the principles of dental radiography and acquire diagnostic quality radiographs;
- Perform complete oral health care assessment and treatment (COHAT), (including dental charting);
- Performing dental prophylaxis inclusive of scaling/polishing and occlusal equilibration
- Maintain and use ultrasonic scaler and polisher;
- Maintenance and use of dental hand instruments;
- Develop a home care program including client education; and
- Perform dental nerve blocks.

The list does not include any competencies related to dental extractions.

For more information related to these standards, please refer to the full document attached to this cover sheet as Appendix “C”.

Canadian Veterinary Medical Association

The Canadian Veterinary Medical Association (CVMA) has also developed a list of essential skills and tasks that all RVTs are trained to perform. This list does not contain any forms of dental procedures.

For more information on this list, please refer to the CVMA’s website, found [here](#).

Risk Analysis

The performance of dental extractions on small animals, such as canines and felines is associated with the following potential complications:

- Fractured tooth roots;
- Displacement of root tips;
- Hemorrhage;
- Trauma to the flap;
- Trauma to adjacent teeth;
- Fractured alveolar bone;
- Iatrogenic jaw fractures;
- Oronasal fistulas;
- Ophthalmic damage; and



- Lip entrapment.

The performance of dental extractions on equine is associated with the following potential complications:

- Infected tooth sockets;
- Infection of the jaw bones (osteomyelitis);
- Dry socket;
- Retained dental fragments;
- Development of fistulas;
- Facial swelling;
- Injured facial nerves or blood vessels; and
- Trauma to adjacent teeth.

The literature also indicates that the risk of these complications is lower in equine than other species in general but does increase when performed in the mandibular cheek.

Limited research was found on the performance of dental extractions on other animals (such as large and small ruminants) but in general described concerns related to infection and retained dental fragments.

For a complete list of the resources referenced in this risk analysis, please refer to Appendix “D”.

Options for Consideration

Transition Council is now asked to consider what direction it would like to recommend related to the delegation of dental extractions. To help in this consideration, the following two options are proposed:

	Option One	Option Two
Decision	Dental Extractions are Delegable	Dental Extractions are Non-Delegable
Proposed Approach	Direct that dental extractions are not included as part of the list of non-delegable authorized activities.	1. Direct that dental extractions are recognized as a form of major surgery. -AND- 1. Direct that dental extractions be included in a College Policy on related to major surgery.



<p>Additional Notes</p>	<p>In choosing this option, Transition Council can also provide further instruction on whether any additional requirements related to the delegating of activity (such as limiting to whom it can be delegated, under what levels of supervision it should be delegated, species-specific considerations, etc.) should be recommended for development through College Policy in accordance with Section 97 of the <i>Veterinary Professionals Act</i>, 2024.</p>	<p>In choosing this option, it is proposed that Transition Council not include specific regulatory language in favour of the development of additional rules, details, and guidance through College Policy in accordance with Section 97 of the <i>Veterinary Professionals Act</i>. This approach is proposed as the level of specificity required to adequately outline the parameters surrounding dental extractions is better suited for, and has historically been contained in, College Policy. This is both in terms of the level of detail that can be provided as well as the ability for adaptation and agility without requiring regulatory amendments as the practice of veterinary medicine advances. For example, potential details could include:</p> <ul style="list-style-type: none"> • The difference between surgical and non-surgical extractions²; • Species-specific considerations in the performance of dental extractions; and • Additional guidance on whether veterinary technician members and auxiliaries are able to provide assistance. <p>This proposed approach also would permit uniformity in the development of additional rules and/or guidance related to all types of major surgery and avoids creating a two-pronged approach that sees some forms of major surgery mentioned in regulation while others are left to College Policy.</p>
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² As seen in the CVBC material contained in Appendix “B”.



Discussion

Transition Council is asked to review this additional information as well as the associated proposals related to the delegation of the performance of dental extractions and to determine its direction related to its proposed inclusion in a regulatory concept related to the authorized activity model.

Attachments

1. Appendix A – Relevant Sections of Legislation, Regulation, By-Law and Policy – Dental Extractions
2. Appendix B – Canadian Jurisdictional Scan – Dentistry
3. Appendix C – OAVT Entry to Practice Standards
4. Appendix D – Risk Analysis References – Dental Extractions

Dental Extractions

Relevant Sections of Legislation, Regulation, By-Law, and Policy

Current Framework Under the *Veterinarians Act*

“practice of veterinary medicine” includes the practice of dentistry, obstetrics including ova and embryo transfer, and surgery, in relation to an animal other than a human being; (“exercice de la médecine vétérinaire”)

3 (1) The principal object of the College is to regulate the practice of veterinary medicine and to govern its members in accordance with this Act, the regulations and the by-laws in order that the public interest may be served and protected.

Idem

(2) For the purpose of carrying out its principal object, the College has the following additional objects:

1. To establish, maintain and develop standards of knowledge and skill among its members.
2. To establish, maintain and develop standards of qualification and standards of practice for the practice of veterinary medicine.
3. To establish, maintain and develop standards of professional ethics among its members.
4. To promote public awareness of the role of the College.
5. To perform such other duties and exercise such other powers as are imposed or conferred on the College under any Act.

7 (1) Subject to the approval of the Lieutenant Governor in Council and with prior review by the Minister, the Council may make regulations with respect to the following matters:

8. Prescribing and governing standards of practice for the profession

Current Framework Under Regulation 1093

“major surgery” means surgery,

- (a) in which bone, viscera or an extensive area of subcutaneous tissue is exposed, or
 - (b) the failure of which would endanger the life or organ function of the animal.
- (“chirurgie lourde”) R.R.O. 1990, Reg. 1093, s. 2; O. Reg. 398/07, s. 1; O. Reg. 356/11, s. 1; O. Reg. 233/15, s. 2 ; O. Reg. 260/22, s. 1.

19. (1) A member is responsible for the conduct of his or her auxiliaries and for the suitability and quality of the performance of their acts. R.R.O. 1990, Reg. 1093, s. 19 (1).

Current Framework in College Policy

Professional Practice Standard: Veterinary Dentistry

Future Framework under the *Veterinary Professionals Act, 2024*

Standards

97 (1) The Council may establish,

(b) standards for the practice of veterinary medicine that must be met and maintained by members.

Schedule 1
Authorized Activities

1 The following are authorized activities for the purposes of the Act:

1. Communicating to an individual a diagnosis identifying a disease, disorder, dysfunction or condition as the cause of an animal's signs and presentation in circumstances in which it is reasonably foreseeable that the individual will rely on the diagnosis.
4. Prescribing a drug.
5. Compounding, dispensing or selling a drug.
6. Performing a procedure on tissue below the dermis.
7. Performing a procedure below the surface of a mucous membrane.
8. Performing a procedure on or below the surfaces of the teeth, including the scaling of teeth and occlusal equilibration.
11. Administering a substance by injection or inhalation, or monitoring of such injection or inhalation.
14. Applying or ordering the application of a prescribed form of energy.
17. Such other authorized activities as may be prescribed.

Exceptions

2 The following are exceptions for the purposes of sections 10 and 11 of the Act:

1. Rendering first aid or temporary assistance in an emergency without fee.
2. Treating an animal if the person is the owner of the animal, is a member of the household of the owner of the animal or is employed for general agricultural or domestic work by the owner of the animal.
3. The administration of a treatment plan by a custodian of an animal if the treatment plan is made by a veterinarian member and carried out at the direction of the owner.

6. Such other exceptions as may be prescribed.

Same

3 The following are exceptions for the purposes of section 10 of the Act:

1. Collecting or using semen as part of a business that engages in the artificial insemination of livestock.
2. Implantation of embryos as part of a business that engages in the artificial insemination of livestock.
3. Confirmation of pregnancy in domesticated farm animals of the genus ovis or capra through ultrasound conducted on the surface of the skin.
4. Confirmation of pregnancy in livestock through blood or milk analysis as part of a business.
5. Administration of heat synchronisation injections to livestock as part of a business that engages in the artificial insemination of livestock.
6. Collecting or transporting ova and embryos of animals other than mammals.
7. Non-surgical insemination.
8. Artificial insemination of invertebrates.
9. Such other exceptions as may be prescribed.

Canadian Jurisdictional Scan - Dentistry	
Province	Standards
Alberta (ABVMA)	<p>Delegation of Veterinary Medicine – Professional Standard</p> <p>The level of supervision is up to the supervising professional to decide based on their level of confidence in the persons' competence, the complexity of the task and the risk to the patient. The following activities require direct or immediate supervision:</p> <ul style="list-style-type: none"> • Anesthesia • Peri and Intra-operative surgical procedures • Dental prophylaxis (Comprehensive Oral Health Assessment and Treatment) • Breeding soundness (with the exception of RVTs trained to perform Bovine and Small Ruminant Pregnancy Detection using Ultrasound)" <p>The following skills are medical in nature, constitute the practice of veterinary medicine, pose a risk to the patient and the public, and can only be delegated to a registered veterinary technologist.</p> <p>Dental Prophylaxis</p> <ul style="list-style-type: none"> • Perform scaling and polishing, subgingival scaling, root planing and curettage • Probe, measure, and chart pockets with a periodontal probe; grade periodontal disease; complete dental chart • Obtain diagnostic images using intraoral radiology positioning • Perform dental anesthesia blocks • Perform flotation of equid teeth • Rabbit and rodent non-surgical occlusal adjustment and correction <p>Anesthesia</p> <ul style="list-style-type: none"> • Perform regional nerve blocks i.e. dental, biopsy site, testicular, linea, distal limb <p>Client Relations Scribe/transcription of medical records dictated (live or recorded) by vet or RVT i.e. dental charts</p>
British Columbia (CVBC)	<p>College of Veterinarians of British Columbia – Part 4: Ethics and Standards</p> <p><i>Specific procedures or treatments under direct personal supervision</i></p> <p>264. (1) A registrant may permit an employee or any other person who is not a registrant to perform the following procedures or treatments or other tasks that are comparably similar in nature to those listed, under the registrant's direct personal supervision, provided they are performed in accordance with the bylaws:</p>

- (a) to induce and maintain anaesthesia;
- (b) to suture skin;
- (c) to collect and transfer embryos;
- (d) to perform dental cleaning and prophylaxis, including dental extractions not requiring surgical intervention;
- (e) to collect urine by cystocentesis;
- (f) to administer rabies vaccine.

Specific procedures or treatments under direct supervision

265. (1) A registrant may permit an employee or any other person who is not a registrant to perform the following procedures or treatments or other tasks that are comparably similar in nature to those listed, under the registrant's direct supervision, provided they are performed in accordance with the bylaws:

- (a) to monitor anaesthetized patients;
- (b) to clean and prepare surgical sites, including wounds;
- (c) to flush ears;
- (d) to apply bandages and splints;
- (e) to perform dental procedures other than dental surgery;
- (f) to perform urinary catheterization;
- (g) to administer enemas;
- (h) to operate a mechanical ventilator.

Specific procedures or treatments under indirect supervision

266. (1) A registrant may permit an employee or any other person who is not a registrant to perform the following procedures or treatments or other tasks that are comparably similar in nature to those listed, under the registrant's indirect supervision, provided they are performed in accordance with the bylaws:

- (a) to perform radiographic procedures;
- (b) to collect specimens for laboratory analysis, except those specimens that require an invasive procedure to collect;
- (c) to perform diagnostic laboratory procedures;
- (d) to administer medications;
- (e) to insert intravenous catheters.

(2) A registrant may permit an employee or any other person who is not a registrant to administer controlled drugs and vaccines excluding rabies vaccines, under the registrant's indirect supervision, provided:

- (a) the registrant has conducted an appropriate examination on the patient consistent with standard medical care,
- (b) the patient has been adequately supervised in the period between the registrant's examination of the patient and the time the registrant's instructions are given, and
- (c) the service is administered in accordance with the bylaws.

CVBC – Professional Practice Standards: Veterinary Dentistry
(Companion Animals)

3. Delegates a dental procedure under the following circumstances:

	<p>a. The veterinarian is confident that the employee has the education and experience to perform the procedure.</p> <p>b. The veterinarian is available on-site to provide appropriate supervision to the competent employee; and</p> <p>c. The veterinarian confirms that the delegated procedure was correctly performed by re-examining the entire oral cavity on completion of the procedure.</p> <p>4. Does not delegate the examination of the teeth and/or oral cavity needed to:</p> <ul style="list-style-type: none"> • Make an assessment • Develop a diagnosis • Formulate a treatment plan. <p>5. Does not delegate extraction procedures.</p>
Manitoba (MVMA)	<p><u>Consultation RVT Scope of Practice and VCPR #2021-05</u></p> <p>Scope of practice under direct supervision: 2-9-10 A Practicing Veterinary Technologist Member may, only under direct supervision,</p> <ul style="list-style-type: none"> (a) utilize chemical restraint; (b) administer and maintain anesthetic and analgesia; (c) intubate an animal; (d) euthanize animals using humane and acceptable practices; (e) perform dental prophylaxis; (f) assist in surgery; and, (g) administer enemas <p>Scope of practice under indirect supervision 2-9-11 A Practicing Veterinary Technologist Member may, only under direct supervision or indirect supervision,</p> <ul style="list-style-type: none"> (a) collect, prepare, and analyze laboratory samples, such as blood samples by venipuncture; fecal samples; urine by free flow, catheterization, or cystocentesis; milk samples; body secretions, abscesses, and visible sores by swabbing; and, skin scrapings; (b) administer medication and veterinary biologics (including excluding rabies vaccines) via intramuscular, subcutaneous or intravenous routes or stomach tubing; (c) administer and monitor fluid therapy; (d) bandage and apply splints; (e) take radiographs and ultrasonic images (f) administer laser and ultrasonic therapy; (g) perform contrast procedures on the gastrointestinal tract and lower urinary tract; (h) express anal sacs internally; (i) utilize E.K.G. machines; (j) tattoo and microchip animals; (k) clean and irrigate external ear canals; (l) administer local anesthetic for the purpose of dehorning food

	<p>animals; (m) dehorn food animals; (n) remove skin sutures or staples; and, (o) dispense prescription products.</p>
<p>New Brunswick (NBVMA)</p>	<p><u>Role of an RVT</u></p> <p>Some of the important tasks carried out by RVTs include:</p> <ul style="list-style-type: none"> • Obtaining and processing diagnostic radiographs and ultrasound • Administration and dispensation of medications and treatments as prescribed by the attending veterinarian • Providing optimum husbandry, restraint and handling • Anaesthetic delivery and monitoring • Prevention and control of zoonotic diseases • Nutrition management • Animal behaviour and welfare • Breeding, reproduction, and neonatal care • Professional practice administration, veterinary hospital management and client relations • Diagnostic laboratory tests (hematology, clinical chemistry, cytology, and urinalysis) • Emergency and first aid • Professionalism and ethics training • Routine, intensive and emergency care of animals • Public education • Exotic animal medicine • Extensive anatomy and physiology training • Sanitation, sterilization and disinfection controls and procedures • In depth knowledge of dental structures, conditions and lesions, causes and stages of diseases • Surgical preparation and assistance • Microbiology, immunology, bacteriology, parasitology, zoonoses, and virology • Training in best practices surrounding biosecurity
<p>Nova Scotia (NSVMA)</p>	<p><u>Veterinary Technologists Regulations made under Section 6 of the Veterinary Medical Act</u></p> <p>Veterinary services requiring immediate supervision</p> <p>14 A registered veterinary technologist must be under the immediate supervision of a veterinarian while performing any of the following veterinary services:</p> <ol style="list-style-type: none"> a) administering IV induction anaesthetic; b) acting as a surgical assistant (sterile) to a veterinarian; c) performing dental extractions that do not require drilling or sectioning of teeth; d) veterinary services not described in clauses (a) to (c), as approved by the Council.

	<p>Veterinary services requiring direct supervision</p> <p>15 A registered veterinary technologist must be under the direct supervision of a veterinarian while performing any of the following veterinary services:</p> <ol style="list-style-type: none"> a) placing and maintaining arterial catheters; b) placing and maintaining urinary catheters; c) administering blood products and cross-matching; d) placing and maintaining nasal esophageal or gastric tubing; e) performing tracheal intubation or extubation; f) performing cystocentesis; g) preparing patient for surgery; h) maintaining and monitoring general anesthesia; i) performing dental prophylaxis; j) administering dental nerve blocks; k) placing and maintaining nasal cannulas; l) performing neonatal care; m) performing tracheostomy and airway maintenance; n) applying splints and slings; o) euthanizing animals; p) placing skin sutures; q) veterinary services not described in clauses (a) to (p), as approved by the Council.
Quebec (OMVQ)	<p>From the government of Quebec - Technologists and Technicians in Animal Health</p> <p>Main tasks</p> <ul style="list-style-type: none"> • Provide care for animals, rehabilitate them, and dress their wounds. • Handle, restrain, and care for animals during treatment and surgery. • Take X-rays, collect, and analyze samples as well as perform other laboratory tests. • Assist the veterinarian before, during, and after operations as well as clean the room after operations. • Prepare and administer medications, vaccines, and treatments prescribed by the veterinarian. • Perform specialized tasks (e.g. animal identification). • Advise clients on animal health care (nutrition, home care, etc.). • Participate in laboratory research. • Perform routine dental procedures and assist veterinary dentists. <p>Positions and policies – Reviews of Veterinary Dentistry</p> <p>The Ordre des médecins vétérinaires du Québec considers that certain acts necessary in the practice of veterinary dentistry may be delegated to</p>

	<p>a person authorized under the <i>Regulation respecting acts which, among those constituting the practice of veterinary medicine, may be performed by classes of persons other than veterinarians</i> . These acts must be performed under the immediate supervision of the veterinarian. Extraction is not an act that may be delegated.</p> <ul style="list-style-type: none"> - Could not locate delegable acts.
Saskatchewan (SVMA)	<p><u>Saskatchewan Veterinary Medical Association – Bylaws</u></p> <p>Under the direction and supervision of a veterinarian licensed in the Full, Life, Limited, Short-term or Educational categories (as established under the Membership Categories and Operational Policies document of the SVMA) may assist in the practice of veterinary medicine by:</p> <ol style="list-style-type: none"> a. administering a drug, medicine, appliance or other application or treatment of whatever nature for the prevention or treatment of bodily injury or disease of animals, or b. performing a surgical or dental operation on an animal. <p>Notwithstanding the forgoing, a registered veterinary technologist member shall not make a diagnosis or determine any course of treatment.</p>

OAVT Entry to Practice Standards

ANATOMY AND PHYSIOLOGY

Knowledge and identification of the unique anatomical and physiological characteristics between species and breeds.

Knowledge of common diseases and their effects on various body systems.

Knowledge of the principles of genetics, genes and their crosses, inheritance, chromosomal abnormalities, types and lethal genes, genetic engineering.

Knowledge of euthanasia methods and techniques, confirmation of life/death

ANESTHESIA AND ANALGESIA

Knowledge of the indications, advantages, disadvantages, effects on the body and the associated adverse side effects of the commonly used peri-anesthetics and anesthetic agents

Identify and observe the stages and planes of general anesthesia and the parameters used for monitoring during anesthesia

Knowledge of the use and function of parts of a gas (inhalant) anesthetic machine, including precision vaporizers and the indications, advantages and disadvantages of re-breathing and non-re-breathing anesthetic circuits

Maintain and troubleshoot performance issues with anesthetic and monitoring equipment

Induce, monitor, maintain and support sedated, anesthetized and recovering animals safely and accurately using clinical signs and monitoring equipment

Knowledge of assisted and controlled ventilation, anesthetic ventilators, blood pressure support, fluid therapy and monitoring acid-base balance and oxygenation

Recognize and respond to anesthetic emergencies, including performing cardiopulmonary resuscitation

Calculate and administer peri-anesthetic and anesthetic agents to the animal

Recognize the indications for endotracheal intubation and successfully intubate and extubate animals

Identify and assess the presence of pain by utilizing a validated pain scoring system

Recognize the indications for regional and local anesthesia, be familiar with the anatomy, equipment and techniques required to perform various regional and local anesthetic blocks

ANIMAL BEHAVIOUR AND WELFARE

Knowledge of the chronological order of behavioural development and social behaviour

Recognize normal and abnormal behaviour patterns, including reading and observing behavioural feedback signs

Understand the physical and psychological requirements of animals, animal welfare, standards of care, and social license to operate

Understand and apply methods of identifying, preventing, eliminating and/or reducing stress response of the animal

BREEDING, REPRODUCTION, AND NEONATAL CARE

Understand the basic reproductive characteristics, techniques, and neonatal requirements including sexual maturity estrus cycles, semen evaluation, gestation/parturition, pregnancy detection and neonatal care

Knowledge of embryo transfer, artificial insemination and common reproductive technologies

Recognize and understand reproductive emergencies

CLINICAL PATHOLOGY (includes parasitology, immunology, virology, urinalysis, hematology, cytology)

Order laboratory tests on an animal or on specimens taken from an animal

Collect and prepare samples for in-clinic and external laboratory diagnostic tests

Understand and perform common diagnostic and laboratory tests

Understand how to interpret test results

Be familiar with coagulation and serological tests

Use and maintain point of care (POC) equipment

List the scientific and common names of parasites and understand their life cycles

Be familiar with the clinical sign of infection, treatment and control of parasite infestations

Perform laboratory techniques and identify common internal, external and blood parasites

Perform fecal analysis

Understand the immune response in the body, including: the difference between bacterial, fungal, and viral infections, antibody classes, (+/- adaptive responses, hypersensitivities and immunodeficiencies)

Describe the types of production and use of vaccines

Know the composition of a virus, the process of replication, classification, and identification of common viruses

Describe sample collection techniques of specimens and submission of samples

Understand and perform the practical and theoretical aspects of sample collection and analysis, staining and interpretation of cytology samples

Determine proper maintenance and quality control of laboratory instruments and equipment.

Perform manual CBC (and using a POC machine)

Perform microscopic examination of blood film to determine cellular morphology, cell number estimates and hematologic indices

Perform urinalysis (sediment, physical, and test chemical properties)

Collect, prepare and evaluate ear cytology

Perform fine needle tissue aspirates, impression smears and bone marrow aspirate/biopsy evaluation

DENTISTRY

Recognize normal and abnormal dental structures, conditions and lesions, causes and stages of gingivitis and periodontitis, and dental related pathologies

Understand the principles of dental radiography and acquire diagnostic quality radiographs

Perform complete oral health care assessment and treatment (COHAT), (including dental charting).

Performing dental prophylaxis inclusive of scaling/polishing and occlusal equilibration

Maintain and use ultrasonic scaler and polisher

Maintenance and use of dental hand instruments

Develop a home care program including client education

Perform dental nerve blocks

DIAGNOSTIC IMAGING

Understand the principles of radiography

Apply knowledge of the radiography machine (digital and analog), radiation safety, radiographic positioning and restraint, radiographic quality, radiographic logs, technique charts, and contrast media and studies

Use hands-free techniques to acquire radiographs

Understand the principles of ultrasonography

Understand the basic physics of ultrasound, the ultrasound machine, the concepts of the final image and artifacts

Safely and effectively produce diagnostic radiographs of various positions

Understand the basic physics of and safety requirements for using MRI, CT, fluoroscopy, and nuclear scintigraphy

EMERGENCY AND CRITICAL CARE

Perform triage, assess, monitor, and initiate urgent treatment to stabilize the emergent animal

Initiate prescribed treatment of the emergent animal including critical nursing care

Recognize when Cardiopulmonary Resuscitation is indicated

Initiate Cardiopulmonary Resuscitation

ETHICS AND JURISPRUDENCE

Knowledge of the applicable laws and regulations of veterinary medicine and veterinary technology

Understand the role of the registered veterinary technician in veterinary medicine and as a member of the veterinary medical team

Knowledge of moral and ethical dilemmas faced by veterinary professionals and animal owners

Adhere to the OAVT Code of Ethics

EXOTIC, LABORATORY and NON-DOMESTIC ANIMAL MEDICINE

Understand and apply optimum housing and husbandry, animal care, behaviour knowledge, restraint and handling, emergency and critical care, anesthesia, surgical techniques and nutritional requirements

Describe non-infectious and infectious pathogens

INTEGRATIVE MEDICINE

Understand treatment and therapeutic modalities including efficacy, safety, and contraindications

Be familiar with nutraceuticals, and other holistic medications and their use per applicable laws and regulations

Physical therapy for hospitalized and non-hospitalized animals

Application of non-conventional therapies

MEDICAL TERMINOLOGY

Understand and apply medical terms, abbreviations, prefixed, suffixes and combining forms

Maintain medical records and documentation

NURSING

Understand the practical and theoretical aspects of:

physical examination and normal and abnormal findings,
common diseases and illnesses,
peri-operative care,
techniques and routes of drug administration
husbandry,
bandaging/splinting,
wound management,
nutritional requirements,
fluid therapy administration,
blood collection and transfusion medicine,
electrocardiogram,
blood pressure monitoring,
anal sac expression, enemas,
permanent identification,
preventative medicine,
adjunctive therapy,
euthanasia and necropsy techniques.
urinary catheterization and maintenance, cystocentesis, and free-catch urine collection

Follow critical care and emergency protocols

NUTRITION

Understand the importance of and explain the role of nutrients in supporting life

Knowledge of nutrition principles in feeding animals, the basic requirements in various life stages, activity levels and the effects that the environment has on nutritional requirements

Understand and calculate an animal's maintenance energy requirements based on its particular life stage and metabolic requirements, why different nutrient levels change with each life stage and what effects excesses or deficiencies may have

Assist in the prevention of diet-related illnesses and conditions

Be familiar with ingredients, deficiencies and additives that can cause adverse effects

PERSONAL AND PROFESSIONAL MANAGEMENT

Develop and demonstrate competencies in critical thinking, communication, professional deportment and collaboration

Have an understanding of veterinary office management and business practices

Acquire proficiency in computer use, practice management software and telemedicine platforms

Understand clinical governance and the role of the registered veterinary technician, team care provision within the applicable legislation and regulation

Contribute to client education to ensure the health and safety of the animal, client, compliance and efficacy of the care or service being provided

PHARMACEUTICAL MATH

Perform unit conversions

Accurately and efficiently calculate drug dosages, and dilutions, and adjust concentrations of solutions

Understand the principles behind performing boluses and Continuous Rates of Infusion (CRIs) of medications

PHARMACOLOGY

Understand pharmacological terminology, pharmacokinetics, pharmacodynamics, and the basic classifications and general characteristics of drugs

Knowledge of safe and effective administration of drugs to animals by understanding withdrawal times and problems with incorrect administration

Compliance with and knowledge of regulatory guidelines and legal requirements regarding handling, storage, disposal and record keeping of controlled drugs

Knowledge of and adherence to all relevant provincial and/or federal legislation and regulations related to reporting, storage, handling and disposal of drugs

Have a basic understanding of common drugs used, their major effects and contraindications
Be able to efficiently source drug interactions

Read and fill prescriptions. Accurately dispense prescribed drugs

Perform inventory control

Reconstitute and prepare drugs

Understand the difference between generic and trade names

RESEARCH

Knowledge of handling and breeding techniques, signs of illness, pain and distress, health of animals and housing conditions within the research environment

Knowledge of and adherence to all relevant provincial and/or federal legislation and regulations

RESTRAINT AND HANDLING

Select and apply handling and restraint that is safe for both the animal and the handler

Understand and apply low stress and humane handling techniques

Understand common behavioural and anatomical characteristics that impact the application of handling and restraint techniques

Handle and restrain animals in various positions for examination and treatment

Show proper use of equipment

SANITATION, STERILIZATION AND DISINFECTION

Understand the principles and different methods of sanitation, sterilization and disinfection, and how and where to use the different methods

Clean and disinfect cages and kennels and establish and maintain appropriate sanitation and nosocomial protocols

Clean instruments, wrap, pack, label and autoclave surgical packs and supplies

Safely operate and maintain autoclave, gas sterilization unit, and cold sterile solutions

Perform proper instrument care and surgical pack preparation for sterilization

SURGICAL NURSING

Monitor animals during surgical procedures

Perform appropriate surgical scrubbing, positioning and operating room conduct. Use aseptic techniques for surgical preparation of animals and surgical sites

Provide postoperative care and post-surgical clean-up

Recognize, and identify surgical instruments, needles, suture material, and their intended use in common surgical procedures

Suturing, stapling, and gluing of an existing skin incision application and removal

ZOONOSES, ONE HEALTH and SAFETY

Understand bacterial, viral, parasitic, and fungal zoonotic pathogens and their etiology, symptoms (human and animal), transmission, treatment, prevention and control

Knowledge of occupational health and safety and standards per applicable legislation and regulation

Knowledge of and adherence to all relevant provincial and/or federal legislation and regulations related to reporting, storage, handling and disposal of hazardous materials

Ensure animal and human safety in all areas of the facility.

Knowledge of One Health principles and their application to veterinary medicine.

Risk Analysis References – Dental Extractions

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AGENDA ITEM 5.3

TOPIC: Further Information Related to the Proposed Regulatory Exemption for the Performance of Mass Culls of Livestock and Poultry

Overview

On November 12, 2024, Transition Council reviewed a proposed regulatory exemption for related to the performance of mass culls.

For more information on this review, please refer to original agenda package item attached to this cover sheet as Appendix “A”.

During this review and discussion, Transition Council raised additional questions related to the reasoning behind this proposed regulatory exemption including larger comments and considerations related to the different forms of euthanasia and their applicability under the *Veterinary Professionals Act, 2024*.

Additional information related to these questions has been gathered, and Transition Council is now tasked with determining its direct related to this specific regulatory exemption.

History of the College’s Work Related to Mass Culls of Livestock and Poultry

Current Framework

The *Veterinarians Act* and Regulation 1093 currently outlines an exclusive scope of practice model for veterinary medicine. This means that unless otherwise specifically stated, veterinary medicine may only be performed by a veterinarian or auxiliary working under their supervision and delegation.

Inclusion in Legislative Reform

The College’s 2018 Concept Paper entitled “Achieving a Modern Approach to the Regulation of Veterinary Medicine in Ontario” contained several recommendations which outlined a proposed shift away from an exclusive scope of practice model in favour of an authorized activity model.

This proposed model offered a clearer definition of what veterinary medicine is and laid out a risk-based approach to authorized activities. Activities that posed the greatest risk of harm or potential harm to animals and/or people were proposed to continue to be regulated under the College’s oversight. Activities that did not fall within these restrictions were recognized as being within the public domain. This proposed model was designed to assist with clarity for the



veterinary profession, the public, and the courts, in determining whether a person had engaged in unauthorized practice.

In addition, the proposed model acknowledged animal care as a system that included both veterinary and non-veterinary animal care providers. The Concept Paper acknowledged that non-veterinary animal care providers can, and do, provide lower-risk therapies and services to animals upon client request and without veterinary oversight. Many of these activities fall outside of the authorized activity model but others cross over. The Concept Paper recognized this overlap and recommended that a system be developed that could properly address these circumstances.

Additional Information Gathered Since November 12, 2024

Since noting the questions raised by Transition Council, College staff has gathered additional information related to the performance of mass culls by third parties, as well as the overall provincial approach to euthanasia to help inform continued review and discussion at the Council table.

This information has been compiled based on the overarching questions raised by Transition Council for ease of reference.

What Forms of Euthanasia Count as Authorized Activities under the *Veterinary Professionals Act, 2024*?

The authorized activity model established under the *Veterinary Professionals Act, 2024* is designed to capture the provision of veterinary (medical) euthanasia through the authorized activity of administering a substance by injection or inhalation. It is not intended to oversee other non-medical forms of humane killing (such as captive bolt) that are regularly performed by other non-veterinary professionals in the province and are overseen by other provincial statutes, such as the *Provincial Animal Welfare Services Act, 2019*, *Animals for Research Act, 1990*, and *Pounds Act, 1990*.

What if a Member of the College Performs a Non-Medical Form of Humane Killing?

Though the performance of non-medical forms of humane killing do not fall under the authorized activities, it does fall under the larger definition of the practice of veterinary medicine contained in the *Veterinary Professionals Act, 2024*. This means that the College would still have oversight of its members (both veterinarians and veterinary technicians) when they perform these activities.

How Did the College Come to this Position Related to Euthanasia?

The College's 2018 Concept Paper did not contain any recommendations related to the authorized activity model and non-medical forms of humane killing. This approach was



determined after several rounds of in-depth conversation amongst the College's Working Groups at that time, which did include consideration of the potential inclusion of all forms of euthanasia but ultimately determined to focus solely on the performance of veterinary (medical) euthanasia.

Did the Ministry Also Consider this Position?

In 2023, a discussion paper on the Modernization of the Practice of Veterinary Medicine published by Ministry of Agriculture, Food, and Rural Affairs¹ (Ministry) contained recommendations related to the proposed inclusion of "performing euthanasia" as an authorized activity under the new statutory model for the practice of veterinary medicine in Ontario.

In May 2023, following approval at the Legacy Council, the College submitted a response to this discussion paper outlining its position that "performing euthanasia" not be included as an authorized activity given its ability to cross over into other non-medical options for humane killing. For more information, please see the full response letter and corresponding internal research found in Appendix "B".

From the College's review of other publicly available responses to the Ministry's consultation, it appeared that several other organizations and associations (including many in the large animal sector) also submitted materials that opposed the inclusion of all forms of euthanasia as an authorized activity.

The College is aware that all of these materials were reviewed by the Ministry and "performing euthanasia" was not included in the list of authorized activities contained in Schedule One of the *Veterinary Professionals Act, 2024*.

Why is a Regulatory Exemption Required for Mass Culls in Livestock and Poultry?

Following the publication of the Ministry's discussion paper in 2023, and further driven by the introduction of the *Veterinary Professionals Act, 2024*, the College was approached by both government and association-based agricultural representatives related to a desire to be able to continue to utilize third-party services in the performance of mass culls in livestock and poultry through the inhalation of substances such as carbon monoxide and nitrogen.

The performance of these forms of mass culls by third parties were particular in nature as they dealt specifically with circumstances outside of the oversight of the Canadian Food and Inspection Agency, the Ministry of Agriculture, Food or Rural Affairs or other forms of government that often employed their own statutory framework to carry out necessary actions. Instead, this request related to circumstances in which industries – such as the pork and poultry industries – required the ability to perform timely and efficient mass culls of animals in relation to supply change management either as part of the usual lifecycle of production animals or

¹ Now the Ministry of Agriculture, Food, and Agribusiness.



adjacent to other public health management strategies. (For example, during the Covid-19 pandemic, the pork industry required strategies for the management of an influx of supply in face of an unprecedented decrease in processing).

These methods were developed based on the National Farm Codes of Practice (often undergoing additional veterinary oversight and training) and were designed to ensure as humane of approaches as possible while also addressing societal need and realities.

However, as these methods now cross over into the authorized activities of administering a substance by injection or inhalation and diagnosis (confirming death of an animal), a regulatory exemption is required to permit their ongoing use.

Discussion

Transition Council is asked to review this additional information as well as the original cover sheet related to a proposed regulatory exemption for mass culls in livestock and poultry and determine its direction related to its proposed inclusion in a regulatory concept related to the authorized activity model.

Attachments

1. Appendix A - November 12th Transition Council Meeting Materials
2. Appendix B – Legacy Council Response Letter and Internal Research

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AGENDA ITEM 6.5

TOPIC: Mass Culls

Overview

Section 9 of the *Veterinary Professionals Act, 2024* establishes the legislative authority for the development of an authorized activity model for the practice of veterinary medicine in Ontario. This framework is further supported by Schedule One of the *Act*, where a list of seventeen (17) authorized activities is outlined.

The *Veterinary Professionals Act, 2024* permits the development of regulatory exemptions related to the authorized activity model.

The College is permitted to develop regulatory exemptions through a combination of the statutory wording outlined in Sections 9 (5) and the regulation-making power contained in Section 93 (1) 7. of the *Act* that allows the College to outline persons (who may also be professionals) who may carry out specified authorized activities in accordance with any prescribed guidelines, processes, terms, conditions, limitations or prohibitions.

This cover sheet outlines proposed recommendations related to a regulatory exemption for mass culls for inclusion in a regulatory concept on the authorized activity model.

Relevant Sections

An overview of the relevant sections of legislation, regulation, by-law, and policy related to mass culls of livestock and poultry (both current and future) has been attached to this cover sheet as Appendix “A”.

History of the College’s Work Related to Mass Culls of Livestock and Poultry

Current Framework

The *Veterinarians Act* and Regulation 1093 currently outlines an exclusive scope of practice model for veterinary medicine. This means that unless otherwise specifically stated, veterinary medicine may only be performed by a veterinarian or auxiliary working under their supervision and delegation.

Under the current framework, the process of mass culls may fall under the scope of practice of veterinary medicine depending on the method used.

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Inclusion in Legislative Reform

The College's 2018 Concept Paper entitled "Achieving a Modern Approach to the Regulation of Veterinary Medicine in Ontario" contained several recommendations which outlined a proposed shift away from an exclusive scope of practice model in favour of an authorized activity model.

This proposed model offered a clearer definition of what veterinary medicine is and laid out a risk-based approach to authorized activities. Activities that posed the greatest risk of harm or potential harm to animals and/or people were proposed to continue to be regulated under the College's oversight. Activities that did not fall within these restrictions were recognized as being within the public domain. This proposed model was designed to assist with clarity for the veterinary profession, the public, and the courts, in determining whether a person had engaged in unauthorized practice.

In addition, the proposed model acknowledged animal care as a system that included both veterinary and non-veterinary animal care providers. The Concept Paper acknowledged that non-veterinary animal care providers can, and do, provide lower-risk therapies and services to animals upon client request and without veterinary oversight. Many of these activities fall outside of the authorized activity model but others cross over. The Concept Paper recognized this overlap and recommended that a system be developed that could properly address these circumstances.

These recommendations were made after several rounds of consideration and conversation amongst both the College's Working Groups and Legacy Council, including extensive background research and two rounds of public consultation.

The *Veterinary Professionals Act, 2024* reflects these recommendations and Transition Council is now in the position to develop a proposed regulatory concept related to the authorized activity model that contains recommendations related to a regulatory exemption pertaining to mass culls of livestock and poultry.

What Will This Look Like?

Persons who meet the guidelines, processes, terms, conditions, limitations, and/or prohibitions outlined in regulation will be permitted to perform certain authorized activities related to animals. The ability to perform these authorized activities will be independent from a veterinarian member and the public will be able to directly access these services.

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Additional Work Completed to Help Inform Regulation Development

The topic of mass culls in livestock and poultry was not on the list of the College's identified areas for consideration in the development of its 2018 Concept Paper. However, following the May 2023 consultation by the Ministry of Agriculture, Food, and Agribusiness related to the modernization of the *Veterinarians Act*, it was brought to the attention of the College by both staff at the Ministry of Agriculture, Food, and Agribusiness and industry stakeholders who wished to raise the use of substance by inhalation in the performance of mass culls in livestock and poultry for consideration for regulatory exemption.¹

This resulted in the College undertaking a research and risk-based review of the performance of mass culls in livestock and poultry to ensure a well-rounded understanding of the environment. This process included ongoing engagement either directly or indirectly (through review of submitted materials) with several interested parties, most notable:

- Ontario Pork;
- Chicken Farmers of Ontario; and
- Direct conversations with livestock and poultry veterinarians.

In completing this work, it became clear that there was a need to ensure the ongoing ability for third parties to administer substances by inhalation (such as carbon monoxide, nitrogen, and carbon dioxide) in accordance with industry standards to perform mass culls of either livestock or poultry. In particular, the administering of these substances by inhalation were used for population control and disease management and were essential to agricultural practices in the province.

This background work facilitated the gathering of necessary insight into this area of consideration and helped to inform the development of the recommendations contained in this cover sheet.

Proposed Recommendations Related to a Regulatory Exemption to Mass Culls of Livestock and Poultry

Within the regulatory concept related to the authorized activity model, it is proposed that the following two (2) recommendations pertaining to a regulatory exemption for mass culls of livestock and poultry be incorporated. These recommendations are in addition to ipersons

¹ The specific authorized activities under consideration are "administering a substance by injection or inhalation, or monitoring of such injection or inhalation." And "communicating to an individual a diagnosis..." for the purpose of confirming death.

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engaging in the mass culling of livestock or poultry being subject to the risk of harm clause under the *Act*.

Each of these recommendations has been developed based on extensive research and conversation including advice obtained from the College’s legal team.

Regulatory Exemption to Allow for Mass Culls of Livestock and Poultry

It is proposed that a regulatory exception be developed to permit the performance of the following authorized activities by a person engaging in the mass culling of livestock or poultry:

1. Administering a substance by inhalation and/or monitoring of such inhalation; and
2. Communicating to an individual the death of an animal(s) or group of animals.

Additional Recommendations for Qualification under the Regulatory Exemption

It is proposed that a regulatory exemption related to mass culls be further restricted to also require a person to adhere with the following guidelines, processes, terms, conditions, limitations, and/or prohibitions:

Recommendation	Reasoning
Has completed specific training in administering substances by inhalation for the purpose of mass culls in livestock and/or poultry that was developed with veterinarian oversight and included practical experience.	The College’s research related to mass culls by substance inhalation indicates that it can be safely performed by a person who has received formal and specific training that was developed with veterinarian oversight and included practical experience. This approach is consistent with recommendations proposed for other regulatory exemptions and is designed to serve the public interest.
Carries out the activities in accordance with the Codes of Practice for the care and handling of farm animals.	The Codes of Practice have been developed to be scientifically informed, practical, and reflect expectations for responsible farm animal care. They are also developed with multi-stakeholder input including that of veterinarians. The Codes of Practice speak directly to mass culls by substance inhalation and serve as a dependable overarching framework for delivery of this service.
Has the knowledge, skill, and judgement to:	Recognition of the need for persons to reflect on their own knowledge, skills, and judgement when determining whether to

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<ol style="list-style-type: none"> 1. Perform the authorized activity safely, effectively, and ethically; and 2. Determine the animal’s condition warrants performance of the authorized activity based on the known risks and benefits. 	<p>proceed with offering an authorized activity is fundamental to ensuring public safety and reflects the core principles of professional regulation.</p>
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These recommendations were developed based on an in-depth and multi-year research and jurisdictional review that sought to determine common and consistent frameworks in place related to the performance of these activities in Ontario.

A person would not be required to provide proof of their eligibility related to these qualifications to the College. Instead, a person would be expected to review the regulatory exemption and determine whether they meet the requirements.

Should the College become aware of a person who is offering mass cull services to the public who may not meet these requirements, the College would have the ability to investigate these concerns including requesting proof of eligibility and adherence and to pursue further action including the ability investigate under either unauthorized practice and/or the risk of harm clause if warranted.

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Example Related to a Regulatory Exemption for Mass Culls of Livestock and Poultry

Example One

<p>Scenario</p> <p>A supply chain issue has resulted in the need to perform mass culls of swine.</p>
<p>Explanation</p> <p>A supply chain issue has resulted in the need for several different producers to perform mass culls of swine. The industry has been preparing for this possibility and has developed a veterinarian overseen and approved process for mass cull of swine by way of nitrogen inhalation that also aligns with the Codes of Practice.</p> <p>One of the producers arranges for a third-party service to arrive on farm to perform the mass cull. The non-veterinary animal care providers of this service conduct an assessment and begin to perform the following authorized activity:</p> <ul style="list-style-type: none"> • Administering a substance by inhalation and monitoring of such inhalation. <p>The non-veterinary care providers encounter no complications or difficulties during the performance of this activity and upon completion, enter the barn to conduct a secondary assessment. Following this assessment, the non-veterinary care providers perform the following authorized activity:</p> <ul style="list-style-type: none"> • Communicating to an individual the death of an animal(s) or group of animals.

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Discussion

Transition Council is asked to review these proposed recommendations related to a regulatory exemption for mass culls of livestock and poultry for inclusion in a regulatory concept on the authorized activity model. To aid in this discussion, Transition Council is encouraged to consider the following questions:

- Is there anything unclear or missing in these proposed recommendations?
- Do the proposed recommendations seem logical?
- Do the proposed recommendations raise any concerns?
- Do the proposed recommendations raise any thoughts or considerations related to unintended consequences?

Section	Main Objectives	Primary Concepts	Additional Information	Transition Comments	Intended Outcomes
<p>Authorized Activities – Regulatory Exemptions - General</p>	<ul style="list-style-type: none"> • Develop clear and risk-based regulatory exemptions. • Confirm majority of statutory exceptions as written. • Outline uniform expectations related to the risk of harm clause. 	<p>General</p> <p>Section 9 of the <i>Veterinary Professionals Act, 2024</i> establishes the legislative authority for the development of an authorized activity model for the practice of veterinary medicine in Ontario. This framework is further supported by Schedule One of the <i>Act</i>, where a list of seventeen (17) authorized activities is outlined.</p> <p>The <i>Act</i> also permits the development of regulatory exemptions related to the authorized activity model.</p> <p>Purpose</p> <p>One of the main objectives of the College in pursuing an authorized activity model was to formally recognize animal care as a system in which both veterinary and non-veterinary animal care providers exist. Most of the services provided by non-veterinary animal care providers fall outside of the authorized activities and exist in the public domain. Some others, however, cross over and require the consideration and development of regulatory exemptions in order to continue to be delivered. In this consideration, the public expects that the College will continue to oversee the performance of activities that pose a risk of harm or potential harm to an animal(s) or group of animals and/or people while also expecting direct access to other competent and skilled animal care providers. Given this, the College is required to conduct a risk-based analysis of potential allowances for other non-veterinary animal care providers to determine whether it is in the public interest to allow for exemptions for certain persons and/or activities.</p> <p>Statutory Exceptions</p> <p>The College proposes that the majority of statutory exceptions contained in Schedule One of the <i>Act</i> remain as presented without any</p>	<p>The one statutory exception that the College is seeking additional clarifications and/or limitations on relates to embryo implantation and will be specifically addressed within its own section.</p>		<p>Creation of a consistent framework for regulatory exemption upon which additional detail can be developed.</p>

Section	Main Objectives	Primary Concepts	Additional Information	Transition Comments	Intended Outcomes
		<p>additional limitations or clarifications outlined in regulation.</p> <p>Applicability of the Risk of Harm Clause</p> <p>The College proposes that regulation language be developed that clarifies that all professions, persons, and/or activities listed within regulatory exemptions remain subject to the risk of harm clause.</p>			
<p>Authorized Activities – Regulatory Exemptions – Mass Culls of Livestock and Poultry</p>	<ul style="list-style-type: none"> • Provide clarity regarding qualifications required. • Provide list of authorized activities permitted. 	<p>General</p> <p>Section 93 (7) iv. of the <i>Veterinary Professionals Act, 2024</i> states that the College may develop regulatory exemptions permitting persons who are not members to carry out specified authorized activities and limiting and governing the carrying out of such activities.</p> <p>Purpose</p> <p>The public expects that the College will continue to oversee the performance of activities that pose a risk of harm or potential harm to an animal(s) or group of animals and/or people. In this oversight, however, the College recognizes that there are times where veterinary performance of an activity may not be the only, or best, way of delivering a service. This includes circumstances where actions may be taken to ensure population management and/or disease control.</p> <p>Regulatory Exemption to Allow for Mass Culls of Livestock and Poultry</p> <p>The College proposes that regulation language be developed to create a regulatory exemption to permit the performance of the following authorized activities by a person engaging in the mass culling of livestock or poultry:</p> <ul style="list-style-type: none"> • Administering a substance by inhalation and/or monitoring of such inhalation; and 	<p>These recommendations were developed based on an in-depth and multi-year research and jurisdictional review that sought to determine common and consistent frameworks in place related to the performance of these activities in Ontario. The College’s research related to mass culls by substance inhalation has indicated that it can be safely performed by a person who has received formal and specific training that was developed with veterinarian oversight and included practical experience.</p> <p>The Codes of Practice have been included in the College’s</p>		<p>Creation of a risk-based regulatory exemption related to mass culls that facilitates continued public access to needed animal care services while also continuing to encourage interprofessional collaboration.</p>

Section	Main Objectives	Primary Concepts	Additional Information	Transition Comments	Intended Outcomes
		<ul style="list-style-type: none"> • Communicating to an individual the death of an animal or group of animals. <p>Additional Recommendations for Qualification Under Regulatory Exemption</p> <p>The College proposes that a regulatory exemption related to mass culls in livestock and poultry also require a person to adhere with the following guidelines, processes, terms, conditions, limitations, and/or prohibitions:</p> <ul style="list-style-type: none"> • The person must have completed specific training in administering substances by inhalation for the purpose of mass culls in livestock and/or poultry that was developed with veterinarian oversight and included practical experience; • The person must carry out the authorized activities in accordance with the Codes of Practice for the care and handling of farm animals; and • The person must have the knowledge, skill, and judgement to: <ul style="list-style-type: none"> ○ Perform the authorized activity safely, effectively, and ethically; and ○ Determine the animal’s condition warrants performance of the authorized activity based on the known risks and benefits. 	<p>recommendations as they have been developed to be scientifically informed, practical, and reflect expectations for responsible farm animal care. They are also developed with multi-stakeholder input including that of veterinarians. The Codes of Practice speak directly to mass culls by substance inhalation and serve as a dependable overarching framework for delivery of this service.</p> <p>A person would not be required to provide proof of their eligibility related to these qualifications to the College. Instead, a person would be expected to review the regulatory exemption and determine whether they meet the requirements. Should the College become aware of a person who is offering mass cull to the public who may not meet these</p>		

Section	Main Objectives	Primary Concepts	Additional Information	Transition Comments	Intended Outcomes
			requirements, the College would have the ability to investigate these concerns including requesting proof of eligibility and adherence and to pursue further action including the ability to investigate under either unauthorized practice and/or the risk of harm clause if warranted.		



Public confidence
in veterinary regulation.

May 29, 2023

Comments on the Modernization of the Regulation of the Veterinary Profession sent by email to:

The Hon. Lisa Thompson
Minister of Agriculture, Food and Rural Affairs
Ontario Ministry of Agriculture, Food and Rural Affairs

Dear Minister Thompson,

On behalf of the Council of the College of Veterinarians of Ontario, I am pleased to provide this response to the government's consultation on the modernization of the regulation of veterinary medicine in Ontario. This is an important undertaking, and Council wishes to applaud you for your leadership in seeking meaningful reform. As the provincial body mandated with regulating the practice of veterinary medicine, our collective focus is supporting a system that is in the best interest of the public and their animals.

The concepts outlined in the government's discussion paper, published in March, are largely consistent with recommendations provided by the College's Council to your Ministry in 2018. These concepts reflect years of work in collaboration with the Ontario Association of Veterinary Technicians and the Ontario Veterinary Medical Association. These proposed reforms will better serve the public and the evolving animal health sector.

Council would like to emphasize that the regulation of veterinary medicine is about managing and mitigating risks related to the broad spectrum of veterinary practice. The College's Council is focused on ensuring that higher risk activities remain the practice of veterinary medicine where accountability is clear, and quality is assured.

Our conversations with other interested parties – including other professions, agri-food organizations, and animal welfare agencies – indicate the significant importance of this bold advancement. Within this, Council has noted three areas on which we would like to offer our thoughts:

- a) **Workforce shortage** – Access to veterinary medicine in Ontario is an existing, and cyclical, problem for the foreseeable future. A modern Act that recognizes both veterinarians and veterinary technicians as part of a system in the delivery of veterinary medicine and supports co-accountability, while only one piece of a puzzle to the labour shortage crisis, will help.

- (b) **Authorized Activities** – The proposed risk of harm model for the new Act is receiving wide support as the concept moves veterinary practice away from an exclusive scope of practice to one that is shared with other service providers, both intraprofessional and interprofessional. This is exciting for all involved.

Many of the comments that the College hears are related to the proposed authorized activities and are specific to regulatory exemptions that may be necessary. For example, broad exemptions for pharmacists and narrower exemptions for chiropractors, physiotherapists, and farriers. The College's Council recognizes that these are important conversations, but they are at the level of regulation not legislation.

The College's Council would like your Ministry to be assured that we are actively working with other groups to create evidence-informed recommendations related to a new regulation that will support the proposed scope of practice model. We are ready to move forward with the work as soon as a Bill is introduced.

- (c) Investigative Powers** – The College has also heard some early feedback from its stakeholders related to the new proposed investigative powers, in particular related to an investigator's ability to observe a member's practice. We recognize and understand that veterinarians and their teams may be nervous about how these powers may affect their day-to-day practice. The College's Council wishes to stress that the proposed powers are designed to increase transparency around legal permissions that already exist within a regulator's mandate and have been judicially upheld. Further, we also wish to stress that these powers are used infrequently and are intended for the most challenging situations (alleged animal abuse; repeated substandard care) and are not viewed to be utilized on a common basis by the College.

In addition to our reflections above, the College has the following recommendations for continued refinement:

(1) Additions to the College's Objects

Further conversation at our Council table, as well as with our stakeholders, have indicated the desire for two additional objects to be added to the new Act. They are:

1. To work in consultation with the Minister to ensure, as a matter of public interest, that the people of Ontario have access to adequate numbers of qualified, skilled and competent licensed veterinary medicine professionals; and
2. To work in consultation with the Minister, as a matter of public interest, towards outcomes optimizing health recognizing the interconnection between people, animals, plants and their shared environment.

These additional objects have been developed based on recognition of both the current and future needs of the province, the profession, and the public. We would welcome the opportunity to engage with your Ministry further on these proposed objects and the thinking behind their proposed inclusion.

(2) Refinement of the Language of Two Authorized Activities - #1 and #2.

Since the Ministry's initial announcement related to legislative reform in November 2022, the College has been engaging in a focused review of the proposed authorized activities to assure their currency and applicability to modern practice. This has included several internal and external conversations. Based on these discussions, the College's Council wishes to propose the following two refinements:

1. Amend authorized activity #1 to remove reference to making a diagnosis and better align with the definition of diagnosis contained in the *Regulated Health Professions Act*.

Current Proposed Wording as Appears in the Discussion Paper: Make or communicate a diagnosis identifying a disease, disorder, dysfunction or condition as the cause of an animal's signs and presentation.

Proposed Revision: Communicate to an individual a diagnosis identifying a disease, disorder, or condition as the cause of an animal's signs and presentation in circumstances in which it is reasonably foreseeable that the individual will rely on the diagnosis.

The College's Council seeks this refinement for the following reasons:

- Making a diagnosis is not an activity that the College can regulate or control. Several individuals, both veterinary and non-veterinary, may have their own thoughts and opinions when presented with an animal seeking care. Instead, it is the activity of communicating a diagnosis, where an individual may and will rely on a medical opinion for a course of treatment or action that presents an inherent risk of harm or potential harm if not offered by a veterinary professional. The College wishes to focus the authorized activity on where the risk of harm exists.
- Alignment with the definition of diagnosis contained in *Regulated Health Professions Act* permits the College to operate with a definition that is well-established and has been previously considered by the Ontario courts and is therefore less open to legislative interpretation.

2. Amend authorized activity #2 to provide clarity around the performance of an assessment for the purpose of fitness for sale/slaughter.

The current proposed wording as it appears in the discussion paper for authorized activity #2 is "Performing an assessment to determine the fitness for purpose or soundness of an animal, or group of animals, on which it is reasonably foreseeable that a person or organization will rely on the assessment."

The College is aware of confusion amongst both veterinary professionals and non-veterinary animal care providers on the intent of this authorized activity.

The College's Council originally proposed this authorized activity to ensure ongoing regulatory oversight of the medical assessment by veterinary professionals of animals for fitness for sale/slaughter. It was also designed to cover any instance where a veterinary signature would be viewed by the public as indication that a medical assessment had been completed.

The College's Council does not intend nor seek to limit general assessments of an animal's overall fitness and health by other non-veterinary animal care providers. To the effect, we would like to suggest that the addition of the word "**medical**" in front of the word assessment may help clarify the intended purpose. We remain open, however, to any further discussions that may be needed around this proposed authorized activity.

(3) Remove the proposed authorized activities of "performing a post-mortem examination" and "performing euthanasia".

The College's Council notes that the discussion paper contains both performing a post-mortem examination and performing euthanasia as proposed authorized activities, with the latter being known to the College as a topic of great discussion amongst several stakeholders. The College's Council recognizes that these are important and higher risk activities. In fact, in the multi-year development of its own concept paper, the College has previously considered and debated their inclusion as authorized activities but ultimately decided against for the following reasons:

Post Mortem-Examinations

The higher-risk aspects of performing post-mortem examinations are captured by the authorized activity related to diagnosis and do not need to be reiterated.

Euthanasia

The provision of veterinary (medical) euthanasia is captured by the authorized activity related to administering a substance by injection or inhalation.

Further, the College's Council chose not to include performing euthanasia as an authorized activity to ensure that it did not inadvertently restrict other non-medical forms of humane killing (such as captive bolt) that are regularly performed by other non-veterinary professionals in the province.

The College's Council recognizes that more discussion may be required related to the provision of euthanasia in Ontario and what does and does not constitute the practice of veterinary medicine. We look forward to engaging in these conversations further with your Ministry.

(4) Confirmation related to proposed authorized activity of performing allergy testing.

The College's Council also notes that the discussion paper does not contain the College's suggested proposed authorized activity of performing allergy testing. This authorized activity was included in the College's concept paper as its provision is associated with a higher risk of harm due to misdiagnosis and the risk of anaphylactic reactions during testing. We would

welcome the opportunity to engage further with your Ministry on our thinking behind this proposed activity and why we believe it is an important inclusion.

(5) Inclusion of Title Protection for the Use of “Dr.”

The College’s Council is pleased to see in the discussion paper proposed expansion to the current title protection clause to include veterinary technicians. However, we also wish to stress that we are also seeking protection of the use of the title “doctor (Dr.)” so that only veterinarians licensed in Ontario can use the term when providing or offering to provide, in Ontario, health care to animals. With the much-needed shift to recognizing that some animal care services exist in the public domain, this title protection is essential to ensuring clarity around the different levels of practitioners that may be offering services.

The College’s Council wishes to thank you once again for your attention and dedication to modernizing the regulation of the veterinary profession in Ontario. We also wish to express our ongoing commitment to aid in all ways possible to advance this important work.

We look forward to continuing to work together to achieve an updated and agile system for ensuring safe and quality medical care for Ontario’s animals.

Sincerely,



Dr. Alana Parisi, DVM
President 2023

2023 College Research – Euthanasia

Jurisdictional Scan

British Columbia

<https://www.cvbc.ca/wp-content/uploads/2021/01/Euthanasia-Guidelines-proposed-revision-Dec-2020-v5.pdf>

See Section H. Euthanasia of Farm Animals

References AVMA Guidelines for the Euthanasia of Animals

<https://www.avma.org/resources-tools/avma-policies/avma-guidelines-euthanasia-animals>

See Part II – Methods of Euthanasia

Also references National Farm Animal Care Council Codes of Practice – which have a Code for each species (Beef cattle, Dairy Cattle, Equine, Sheep, ect.)

<https://www.nfacc.ca/codes-of-practice>

In the Veterinarians Act – <https://www.cvbc.ca/wp-content/uploads/2020/03/Veterinarians-Act.pdf>

Nothing specific to euthanasia. Definition of veterinary medicine is:

"veterinary medicine" means the art and science of veterinary medicine, dentistry and surgery, and includes, whether or not for consideration,

(a) the diagnosis and treatment of animals for the prevention, alleviation or correction of disease, injury, pain, defect, disorder, or other similar condition,

(b) the provision of a service prescribed by regulation of the Lieutenant Governor in Council, and

(c) the provision of advice in respect of a matter referred to in paragraph (a) or (b).

Alberta

In the Veterinary Profession Act – https://kings-printer.alberta.ca/1266.cfm?page=V02.cfm&leg_type=Acts&isbncln=9780779725229

Nothing about euthanasia.

In the Veterinary Profession General Regulation - https://kings-printer.alberta.ca/documents/Regs/1986_044.pdf

Nothing about euthanasia.

Professional Standard: Delegation of Veterinary Medicine - <https://abvma.in1touch.org/document/6039/Delegation%20of%20Veterinary%20Medicine%20Prof%20Std%20approved%20by%20ABVMACouncil%20Feb2023%20Final.pdf>

The following skills are medical in nature, constitute the practice of veterinary medicine, pose a risk to the patient and the public, and can only be delegated to a registered veterinary technologist.

Euthanasia

- Discuss quality of life assessments with client
- Administer premedication and euthanasia solution with or without client present
- Confirm patient is deceased

Manitoba

- MVMA General By-law No. 1 - https://www.mvma.ca/wp-content/uploads/2019/09/MVMA-By-law_Member-approval-May29_19.pdf
- Scope of practice under direct supervision
2-9-10 A Practicing Veterinary Technologist Member may, only under direct supervision,
 - (a) utilize chemical restraint;
 - (b) administer and maintain anesthetic and analgesia;
 - (c) intubate an animal;
 - (d) euthanize animals using humane and acceptable practices;
 - (e) perform dental prophylaxis;
 - (f) administer rabies vaccine;
 - (g) assist in surgery; and,
 - (h) administer enemas
- The Veterinary Medical Act – <https://web2.gov.mb.ca/laws/statutes/ccsm/pdf.php?cap=v30>
- Nothing about euthanasia.

Saskatchewan

Bylaws - <https://svma.sk.ca/wp-content/uploads/2022/04/BYLAWS-2020-FINAL-VERSION-Sept-2021.pdf>

12.3 Member responsibilities to animals

j. Humane euthanasia of animals is an ethical veterinary procedure and shall be offered as a treatment option should it be requested by a client.

The Veterinarians Act - <https://svma.sk.ca/wp-content/uploads/2019/12/Veterinarians-Act-1987.pdf>

Nothing about euthanasia

Practice Standards – <https://svma.sk.ca/wp-content/uploads/2022/09/PSC-Guidelines-Updated-September-2022.pdf>

Only mention in relation to medical records

New Brunswick

Resources on website – restricted to members only.

Veterinarians Act - <https://www.canlii.org/en/nb/laws/astat/snb-1965-c-106/latest/snb-1965-c-106.pdf>

Nothing about euthanasia.

Nova Scotia

NSVMA Veterinary Act - <https://nsvma.ca/act/>

Nothing about euthanasia

Standards of Practice - <https://nsvma.ca/standards-of-practice/>

Nothing about euthanasia.

Other Federal and Provincial Statutes Reviewed

Health of Animals Act (Canada)

- Minister able to determine how to dispose of seized animals, including methods of euthanasia.

Research Facilities and Supply Facilities Regulation made under the Animals for Research Act (Ontario)

- Outlines several options for euthanasia – both medical and non-medical.

Pounds Regulation made under the Animals for Research Act (Ontario)

- Outlines several options for euthanasia – both medical and non-medical.



AGENDA ITEM 5.4

TOPIC: Non-Delegable Activities – Further Consideration of Non-Drug Related Authorized Activities Performed through Initiation

Overview

On November 7, 2024, Transition Council reviewed a list of authorized activities (or components of) that were proposed to be able to be performed by a veterinary technician member through a process known as initiation.

For more information on this review, please refer to Agenda Item **5.2** in the November 7, 2024 meeting package.

During this review and discussion, Transition Council flagged the performance of two non-drug related authorized activities related to rectal examination and anal gland expression as requiring more background research and consideration before determining whether to recommend these procedures as permissible through initiation.

This additional information has been gathered, and Transition Council is now tasked with determining its direction related to this specific activity.

History of the College’s Work and Positioning

Current Framework

The performance of rectal examinations on animals is considered the practice of veterinary medicine under the *Veterinarians Act*. This is a delegable activity that a veterinarian may use their professional judgement in determining the level of supervision required.

The performance of anal gland expression is considered in the public domain under the *Veterinarians Act* when performed by non-members as long as the glands are not impacted, inflamed or otherwise in need of veterinary care.

The performance of anal gland expression is a delegable activity and a veterinarian is permitted to use their professional judgement in determining the level of supervision required.

Inclusion in Legislative Reform

The College’s 2018 Concept Paper entitled “Achieving a Modern Approach to the Regulation of Veterinary Medicine in Ontario” contained several recommendations related to the inclusion of both veterinarians and veterinary technicians under the same statutory framework. As part of



this proposal, the Concept Paper outlined the need for continued adherence to ongoing public expectations related to the provision of safe and accountable veterinary care.

The Concept Paper did not contain any specific recommendations related to the performance of rectal examinations by veterinary technicians.

The Concept Paper proposed that veterinary technicians be permitted to perform “expressing anal sacs internally” under the order of a veterinarian.

Additional Work Completed Since November 7, 2024

Since receiving direction from Transition Council, additional information and analysis has been gathered to help inform continued review and discussion at the Council table. This has included a review of resources related to the core competencies of registered veterinary technicians and a literature scan to identify risks.

This information has been divided by activity to assist in ease of reference.

Rectal Examinations

RVT Education and Core Competencies

Ontario Association of Veterinary Technicians

The Ontario Association of Veterinary Technicians (OAVT) has developed a list of Entry to Practice Standards that contains the core competencies that a RVT is expected to hold on entry to practice. Included in this list is a section related to nursing that states that all graduates should be able to:

- Understand the practical and theoretical aspects of physical examination and normal and abnormal findings.

For more information related to these standards, please refer to the full document attached to this cover sheet as Appendix “A”.

Canadian Veterinary Medical Association

The Canadian Veterinary Medical Association (CVMA) has also developed a list of essential skills and tasks that all RVTs are trained to perform. This list states that all graduates are trained in extensive anatomy and physiology training.

For more information on this list, please refer to the CVMA’s website, found [here](#).

Risk Analysis



The risks of performing a rectal examination on animals varies by species. The most common associated risk is rectal tears. The risk of rectal tears is uncommon in dogs and cats. It is more likely to occur in cattle and equine. Partial tears can typically be treated with conservative care. Complete tears often require surgical repair and supportive care.

Anal Gland Expression

RVT Education and Core Competencies

Ontario Association of Veterinary Technicians

The Ontario Association of Veterinary Technicians (OAVT) has developed a list of Entry to Practice Standards that contains the core competencies that a RVT is expected to hold on entry to practice. Included in this list is a section related to nursing that states that all graduates should be able to:

- Understand the practical and theoretical aspects of
 - physical examination and normal and abnormal findings; and
 - anal sac expression and enemas.

For more information related to these standards, please refer to the full document attached to this cover sheet as Appendix “A”.

Canadian Veterinary Medical Association

The Canadian Veterinary Medical Association (CVMA) has also developed a list of essential skills and tasks that all RVTs are trained to perform. This list states that all graduates are trained in extensive anatomy and physiology training.

For more information on this list, please refer to the CVMA’s website, found [here](#).

Risk Analysis

The risks associated with anal gland expression are at the lower end of the spectrum with some known risks when performed in dogs. If not done properly, there is a risk of injury to the dog’s anal area, including irritation, inflammation, or infection. Incorrect technique or excessive pressure can also cause discomfort and pain to the dog.

Options for Consideration

Based on the research gathered, the following path is presented for Transition Council’s consideration and ultimate approval:



Proposal #1 – Veterinary Technician Members be Permitted to Perform Rectal Examinations Through Initiation

It is proposed that rectal examinations be included as part of the authorized activities permitted to be performed by veterinary technician members through initiation for the following reasons:

1. Rectal examinations, especially in large animals such as bovine and equine – are essential to gathering information related to an animal’s condition; and
2. Transition Council has already approved the performance of other like-minded procedures – such as placing esophageal or endotracheal tubing, placing a urinary catheter, collecting a swab sample beyond the point of an animal’s nasal passage, and conducting a vaginal or cervical exam.

Proposal #2 – That the Performance of Anal Gland Expression Remain Able to be Performed by Veterinary Technician Members Either Under a Veterinarian Member’s Order or Delegation

It is proposed that the performance of anal gland expression remain able to be performed by veterinary technician members either under a veterinarian member’s order or delegation (not by initiation) for the following reasons:

1. The process of initiation has been designed to facilitate the performance of certain authorized activities by veterinary technician members in circumstances where they may be providing time-sensitive care prior to the establishment of veterinarian-client-patient relationship (VCPR) or prior to a veterinarian member’s involvement in the animal’s care;
2. The performance of anal gland expression, while lower-risk, does not present as an activity that needs to be performed prior to a veterinarian’s involvement in the animal’s care; and
3. The performance of anal gland expression will be permitted to be outlined in a veterinarian’s order – which could allow for a veterinary technician member to carry out this activity independently as long as they adhere to the parameters of the order.

Discussion

Transition Council is asked to review this additional information as well as the associated proposals related to the performance of these non-drug related authorized activities and to determine its direction related to their proposed inclusion in a regulatory concept related to the authorized activity model.

Attachments

1. Appendix A – OAVT Entry to Practice Standards

Entry to Practice Standards

ANATOMY AND PHYSIOLOGY

Knowledge and identification of the unique anatomical and physiological characteristics between species and breeds.

Knowledge of common diseases and their effects on various body systems.

Knowledge of the principles of genetics, genes and their crosses, inheritance, chromosomal abnormalities, types and lethal genes, genetic engineering.

Knowledge of euthanasia methods and techniques, confirmation of life/death

ANESTHESIA AND ANALGESIA

Knowledge of the indications, advantages, disadvantages, effects on the body and the associated adverse side effects of the commonly used peri-anesthetics and anesthetic agents

Identify and observe the stages and planes of general anesthesia and the parameters used for monitoring during anesthesia

Knowledge of the use and function of parts of a gas (inhalant) anesthetic machine, including precision vaporizers and the indications, advantages and disadvantages of re-breathing and non-re-breathing anesthetic circuits

Maintain and troubleshoot performance issues with anesthetic and monitoring equipment

Induce, monitor, maintain and support sedated, anesthetized and recovering animals safely and accurately using clinical signs and monitoring equipment

Knowledge of assisted and controlled ventilation, anesthetic ventilators, blood pressure support, fluid therapy and monitoring acid-base balance and oxygenation

Recognize and respond to anesthetic emergencies, including performing cardiopulmonary resuscitation

Calculate and administer peri-anesthetic and anesthetic agents to the animal

Recognize the indications for endotracheal intubation and successfully intubate and extubate animals

Identify and assess the presence of pain by utilizing a validated pain scoring system

Recognize the indications for regional and local anesthesia, be familiar with the anatomy, equipment and techniques required to perform various regional and local anesthetic blocks

ANIMAL BEHAVIOUR AND WELFARE

Knowledge of the chronological order of behavioural development and social behaviour

Recognize normal and abnormal behaviour patterns, including reading and observing behavioural feedback signs

Understand the physical and psychological requirements of animals, animal welfare, standards of care, and social license to operate

Understand and apply methods of identifying, preventing, eliminating and/or reducing stress response of the animal

BREEDING, REPRODUCTION, AND NEONATAL CARE

Understand the basic reproductive characteristics, techniques, and neonatal requirements including sexual maturity estrus cycles, semen evaluation, gestation/parturition, pregnancy detection and neonatal care

Knowledge of embryo transfer, artificial insemination and common reproductive technologies

Recognize and understand reproductive emergencies

CLINICAL PATHOLOGY (includes parasitology, immunology, virology, urinalysis, hematology, cytology)

Order laboratory tests on an animal or on specimens taken from an animal

Collect and prepare samples for in-clinic and external laboratory diagnostic tests

Understand and perform common diagnostic and laboratory tests

Understand how to interpret test results

Be familiar with coagulation and serological tests

Use and maintain point of care (POC) equipment

List the scientific and common names of parasites and understand their life cycles

Be familiar with the clinical sign of infection, treatment and control of parasite infestations

Perform laboratory techniques and identify common internal, external and blood parasites

Perform fecal analysis

Understand the immune response in the body, including: the difference between bacterial, fungal, and viral infections, antibody classes, (+/- adaptive responses, hypersensitivities and immunodeficiencies)

Describe the types of production and use of vaccines

Know the composition of a virus, the process of replication, classification, and identification of common viruses

Describe sample collection techniques of specimens and submission of samples

Understand and perform the practical and theoretical aspects of sample collection and analysis, staining and interpretation of cytology samples

Determine proper maintenance and quality control of laboratory instruments and equipment.

Perform manual CBC (and using a POC machine)

Perform microscopic examination of blood film to determine cellular morphology, cell number estimates and hematologic indices

Perform urinalysis (sediment, physical, and test chemical properties)

Collect, prepare and evaluate ear cytology

Perform fine needle tissue aspirates, impression smears and bone marrow aspirate/biopsy evaluation

DENTISTRY

Recognize normal and abnormal dental structures, conditions and lesions, causes and stages of gingivitis and periodontitis, and dental related pathologies

Understand the principles of dental radiography and acquire diagnostic quality radiographs

Perform complete oral health care assessment and treatment (COHAT), (including dental charting).

Performing dental prophylaxis inclusive of scaling/polishing and occlusal equilibration

Maintain and use ultrasonic scaler and polisher

Maintenance and use of dental hand instruments

Develop a home care program including client education

Perform dental nerve blocks

DIAGNOSTIC IMAGING

Understand the principles of radiography

Apply knowledge of the radiography machine (digital and analog), radiation safety, radiographic positioning and restraint, radiographic quality, radiographic logs, technique charts, and contrast media and studies

Use hands-free techniques to acquire radiographs

Understand the principles of ultrasonography

Understand the basic physics of ultrasound, the ultrasound machine, the concepts of the final image and artifacts

Safely and effectively produce diagnostic radiographs of various positions

Understand the basic physics of and safety requirements for using MRI, CT, fluoroscopy, and nuclear scintigraphy

EMERGENCY AND CRITICAL CARE

Perform triage, assess, monitor, and initiate urgent treatment to stabilize the emergent animal

Initiate prescribed treatment of the emergent animal including critical nursing care

Recognize when Cardiopulmonary Resuscitation is indicated

Initiate Cardiopulmonary Resuscitation

ETHICS AND JURISPRUDENCE

Knowledge of the applicable laws and regulations of veterinary medicine and veterinary technology

Understand the role of the registered veterinary technician in veterinary medicine and as a member of the veterinary medical team

Knowledge of moral and ethical dilemmas faced by veterinary professionals and animal owners

Adhere to the OAVT Code of Ethics

EXOTIC, LABORATORY and NON-DOMESTIC ANIMAL MEDICINE

Understand and apply optimum housing and husbandry, animal care, behaviour knowledge, restraint and handling, emergency and critical care, anesthesia, surgical techniques and nutritional requirements

Describe non-infectious and infectious pathogens

INTEGRATIVE MEDICINE

Understand treatment and therapeutic modalities including efficacy, safety, and contraindications

Be familiar with nutraceuticals, and other holistic medications and their use per applicable laws and regulations

Physical therapy for hospitalized and non-hospitalized animals

Application of non-conventional therapies

MEDICAL TERMINOLOGY

Understand and apply medical terms, abbreviations, prefixed, suffixes and combining forms

Maintain medical records and documentation

NURSING

Understand the practical and theoretical aspects of:

physical examination and normal and abnormal findings,
common diseases and illnesses,
peri-operative care,
techniques and routes of drug administration
husbandry,
bandaging/splinting,
wound management,
nutritional requirements,
fluid therapy administration,
blood collection and transfusion medicine,
electrocardiogram,
blood pressure monitoring,
anal sac expression, enemas,
permanent identification,
preventative medicine,
adjunctive therapy,
euthanasia and necropsy techniques.
urinary catheterization and maintenance, cystocentesis, and free-catch urine collection

Follow critical care and emergency protocols

NUTRITION

Understand the importance of and explain the role of nutrients in supporting life

Knowledge of nutrition principles in feeding animals, the basic requirements in various life stages, activity levels and the effects that the environment has on nutritional requirements

Understand and calculate an animal's maintenance energy requirements based on its particular life stage and metabolic requirements, why different nutrient levels change with each life stage and what effects excesses or deficiencies may have

Assist in the prevention of diet-related illnesses and conditions

Be familiar with ingredients, deficiencies and additives that can cause adverse effects

PERSONAL AND PROFESSIONAL MANAGEMENT

Develop and demonstrate competencies in critical thinking, communication, professional deportment and collaboration

Have an understanding of veterinary office management and business practices

Acquire proficiency in computer use, practice management software and telemedicine platforms

Understand clinical governance and the role of the registered veterinary technician, team care provision within the applicable legislation and regulation

Contribute to client education to ensure the health and safety of the animal, client, compliance and efficacy of the care or service being provided

PHARMACEUTICAL MATH

Perform unit conversions

Accurately and efficiently calculate drug dosages, and dilutions, and adjust concentrations of solutions

Understand the principles behind performing boluses and Continuous Rates of Infusion (CRIs) of medications

PHARMACOLOGY

Understand pharmacological terminology, pharmacokinetics, pharmacodynamics, and the basic classifications and general characteristics of drugs

Knowledge of safe and effective administration of drugs to animals by understanding withdrawal times and problems with incorrect administration

Compliance with and knowledge of regulatory guidelines and legal requirements regarding handling, storage, disposal and record keeping of controlled drugs

Knowledge of and adherence to all relevant provincial and/or federal legislation and regulations related to reporting, storage, handling and disposal of drugs

Have a basic understanding of common drugs used, their major effects and contraindications
Be able to efficiently source drug interactions

Read and fill prescriptions. Accurately dispense prescribed drugs

Perform inventory control

Reconstitute and prepare drugs

Understand the difference between generic and trade names

RESEARCH

Knowledge of handling and breeding techniques, signs of illness, pain and distress, health of animals and housing conditions within the research environment

Knowledge of and adherence to all relevant provincial and/or federal legislation and regulations

RESTRAINT AND HANDLING

Select and apply handling and restraint that is safe for both the animal and the handler

Understand and apply low stress and humane handling techniques

Understand common behavioural and anatomical characteristics that impact the application of handling and restraint techniques

Handle and restrain animals in various positions for examination and treatment

Show proper use of equipment

SANITATION, STERILIZATION AND DISINFECTION

Understand the principles and different methods of sanitation, sterilization and disinfection, and how and where to use the different methods

Clean and disinfect cages and kennels and establish and maintain appropriate sanitation and nosocomial protocols

Clean instruments, wrap, pack, label and autoclave surgical packs and supplies

Safely operate and maintain autoclave, gas sterilization unit, and cold sterile solutions

Perform proper instrument care and surgical pack preparation for sterilization

SURGICAL NURSING

Monitor animals during surgical procedures

Perform appropriate surgical scrubbing, positioning and operating room conduct. Use aseptic techniques for surgical preparation of animals and surgical sites

Provide postoperative care and post-surgical clean-up

Recognize, and identify surgical instruments, needles, suture material, and their intended use in common surgical procedures

Suturing, stapling, and gluing of an existing skin incision application and removal

ZOONOSES, ONE HEALTH and SAFETY

Understand bacterial, viral, parasitic, and fungal zoonotic pathogens and their etiology, symptoms (human and animal), transmission, treatment, prevention and control

Knowledge of occupational health and safety and standards per applicable legislation and regulation

Knowledge of and adherence to all relevant provincial and/or federal legislation and regulations related to reporting, storage, handling and disposal of hazardous materials

Ensure animal and human safety in all areas of the facility.

Knowledge of One Health principles and their application to veterinary medicine.